

COUNTY BOROUGH OF SOUTHPORT



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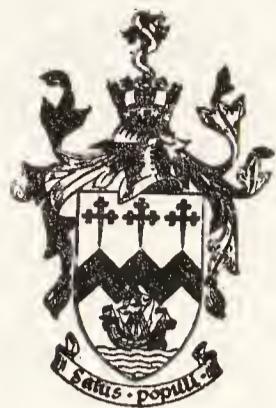
ANNUAL REPORT
OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER
AND
MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1964

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.

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HEALTH COMMITTEE, 1964

(appointed 21st May, 1964)

Chairman	Councillor H. H. GLAISHER
Vice-Chairman	...	...	...	...	Councillor R. B. HUGHES
The Mayor	...	...	...	...	Alderman P. R. SWITZER, J.P.
Aldermen	...	...	...	...	E. McCABE, J.P. W. PAULDEN Mrs. E. SMITH
Councillors	...	...	...	...	J. CAMPION Dr. W. LIMONT, J.P. Mrs. B. EATON Mrs. B. POGSON T. R. GLOVER L. F. SPENCE R. J. HUGHES, J.P. F. STANWORTH, B.Sc. Mrs. J. LEECH G. S. WILKINS
Co-opted Member	...	...	...	...	Dr. P. Y. LYLE, M.C.

STAFF 1964

(where staff are not shown individually the figures given are the numbers in post on 31st December, 1964—* indicates part-time staff)

Medical Officer of Health	...	...	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H., F.R.S.H.
Deputy Medical Officer of Health	...	...	ANNA I. DAVISON, M.B., Ch.B., C.P.H.
Assistant Medical Officers	...	...	N. HOWARD, M.R.C.S., L.R.C.P., D.P.H., D.I.H. M. C. FELL, M.B., Ch.B., D.P.H., D.C.H.
Consultant Obstetric Surgeon	...	...	*A. G. WILSON, D.Obst., R.C.O.G., M.R.C.O.G.
Medical Officer for Tuberculosis Service	...	...	*R. S. COOK, M.B., Ch.B.
(By arrangement with Liverpool Regional Hospital Board)			
Principal Dental Officer	...	...	W. ROTHWELL, L.D.S.(Liv.)
Dental Officers	...	...	P. L. HEATHCOTE, L.D.S.(Liv.) J. B. LEECH, L.D.S., R.C.S.(Eng.)
Public Analyst	...	...	...
		...	*G. H. WALKER, Ph.D., F.R.I.C.
Chief Public Health Inspector	...	...	S. D. BURGE (a) (b) (c).
Deputy Chief Public Health Inspector	...	...	W. VICKERS (a) (b) (c). 3 Specialist Inspectors 5 District Inspectors. 2 Pupil Inspectors.
Superintendent Health Visitor	...	...	E. DOWD (d) (e) (f).
Senior Health Visitor	...	...	A. MULLAN (d) (e) (f). *12 Health Visitors 1 Tuberculosis Health Visitor. 2 State Registered Nurses for geriatric duties.

Non-Medical Supervisor of Midwives, Inspector of Nursing Homes and Domestic Help Service Organiser		M. McALEAVY (d) (e). 3 District Midwives. 2 Pupil Midwives.
Superintendent, District Nurses' Home (under agency arrangements)		A. BURROWS (d) (e) (g)
Deputy Superintendent, District Nurses' Home		S. DUGDALE (d) (e) (g) 13 District Nurses. *4 District Nurses.
Matron, Southport Day Nursery	...	A. K. BAXTER (d) (e) (h).
Deputy Matron, Southport Day Nursery ... ... ...	...	M. ROBERTS (n). 1 Warden. 3 Nursery Nurses. 4 Nursery Assistants. 4 Students.
Matron, Bedford Park Day Nursery ...		M. RAYNOR (i)
Deputy Matron, Bedford Park Day Nursery ... ... ...	...	S. CLARKE (i) 1 Warden. 1 Nursery Nurse 3 Nursery Assistants. 2 Students.
Physiotherapist ... ... ...	...	*P. S. Flower (j).
Occupational Therapist ... ... ...	...	J. C. HAWKYARD (k).
Chiropodist for Expectant Mothers and Handicapped Persons ... ... ...	...	*W. H. ROGANS, M.Ch.S.
Chiropodist (Service for the Elderly). (under agency arrangements)	...	W. R. WILKINSON, M.Ch.S. 5 Chiropodists. *1 Receptionist.
Senior Mental Welfare Officer ...		K. BAIN (l) (m). 2 Mental Welfare Officers. 1 Mental Welfare Assistant. 1 Craft Instructress.
Supervisor, Training and Industrial Centre ... ... ...	...	I. H. BAYLEY.
Senior Assistant Supervisor, Training and Industrial Centre ... ...	...	M. TOWNLEY (n). 2 Assistant Teachers. 1 Craftsman/Teacher (o).
Psychiatric Social Worker ... ...	...	Vacant.
Administrative Assistant ... ...	...	F. H. DIX, A.C.I.S., Grad.A.C.C.A.
Chief Clerk ... ... ...	...	W. R. HOLGATE. 2 Senior Clerks. 9 Clerks and Shorthand/Typists.
Chief Fire & Ambulance Officer ...		J. PERKINS, M.B.E., Grad. 1. Fire E. 21 Firemen/Ambulancemen.

Miscellaneous Staff 1 Infectious Diseases Enquiry Officer/
Mortuary Technician.
1 Rodent Officer.

- (a) Public Health Inspector's Certificate.
- (b) Meat Inspector's Certificate.
- (c) Smoke Inspector's Certificate.
- (d) State Registered Nurse.
- (e) Certificate Central Midwives Board.
- (f) Health Visitor's Certificate.
- (g) Queen's Nurse.
- (h) State Registered Children's Nurse.
- (i) Certificated Nursery Nurse.
- (j) Member of Chartered Society of Physiotherapists.
- (k) Member of the Association of Occupational Therapists.
- (l) State Registered Mental Nurse.
- (m) Certificate of Royal Medico-Psychological Association.
- (n) Enrolled Nurse.
- (o) Diploma of National Association of Mental Health.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1964

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE COUNTY BOROUGH OF SOUTHPORT

I have the honour to present my report for the year 1964.

Good progress has been made in the implementation of the town's approved proposals under the Ten Year Plan. Though there has been some delay in translating the capital expenditure part of the programme into new buildings, construction of the following began during the year and should be completed in 1965:—

- (a) Children's Home for Mentally Handicapped Children, and
- (b) Home for Mentally Handicapped Adults.

The undermentioned:—

- (a) the new Centre for Maternity and Child Welfare at Ainsdale, which is likely to be used in addition for other purposes, and
- (b) the proposed Home for 30 Mentally Infirm Elderly Adults are in an advanced planning stage and it is expected that construction will begin in 1965.

Much thought and preparatory work has been undertaken in respect of the proposed new Social Services Building in which the Council hope to accommodate the Children's, Welfare, and Health departments together with the central clinics, and to provide space for the offices of the local Executive Council and perhaps some of the Voluntary Social Services personnel. Though the planning of this most important project is still in the early stages it is hoped that progress will be made in 1965 and that there will arise on the corner site at Church Street and Hoghton Street where the three Health Department central buildings now stand, a modern building, which will not only enhance the beauty of our borough but will be of the utmost service to its citizens for many years to come. Great emphasis by the Central Government is now being laid on the development of the Social Services in this country and a town like Southport which has the lowest rate debt per head of any County Borough in England, should be able to show a lead by providing a centre of the kind which is proposed.

There are those who believe that the Ten Year Plans for the hospitals and the local health authority services were specifically framed in such a way that some of the increasing burden of cost in the hospital service might be offset by better local health and welfare services which are financed in part from the local rates. There is no doubt that there has been, and will be further, steep increases in the cost of the local health authorities' services, but this must be so if the Ten Year Plans are to be fully implemented and similar increases are very evident in the hospital service. One has to consider the overall need and view the position in perspective. Medical science is advancing rapidly and to make its benefits available to all is very costly. For example, though the lengthening of the expectation of life is welcomed by all of us, we do not stop to consider the additional cost to the country as a whole of these extra years, often happy but usually unproductive years from the economic standpoint: the cost is very great and has to be provided from rates and from taxes. Again, increasing attention is being given to procedures which have some value in the diagnosis of pre-cancerous states, work which is in its infancy in this country but which when it becomes available to the whole population will help to save lives, but will inevitably increase expenditure both in hospital and in local authority services.

Since in the future it would appear that the amount of money available to the medical services is bound to be limited, we need to place emphasis on those measures which will give most return for least cost. Fluoridisation of public water supplies is one of these and is now becoming more common as public confidence is gained after the campaign to discredit it: I hope that it will be possible to make progress in this matter in Southport though technical and other difficulties at present prevent this.

The Registrar General's mid year 1964 estimate of Southport's population was 80,080. This figure is calculated in a particular way taking into account known factors such as the Birth and Death Rates and estimating other factors which are unknown, such as the number of people leaving and the number coming to live in a town. The census figures taken every ten years are a more accurate guide. Though the Registrar General's estimated figure tends to be on the low side it seems likely that in 1965 Southport's population will drop to below the 80,000 mark.

The difference between the numbers of births and deaths in 1964 was 355. An additional number equal to the number of people leaving the town must be added to this difference in order to obtain an estimate of the number of people who must come to live in the town during the year if the population is to be maintained. The wastage is quite high and all efforts to offset it must be worthwhile if the town is to be able to continue to manage its own affairs as a County Borough. There are indications that the Ainsdale developments in housing may for a time more than offset the loss in population but this remains to be seen and will probably not be finally known until the next Census in 1971. In the meantime the estimated figures from the last Census until now are as follow:—

Last Census 1961	—	82,004
Estimated 1962	—	82,730
„ 1963	—	80,160
„ 1964	—	80,080

I am happy to report that the number of births was 1,105, nine more than in 1963, and that the Infant Mortality Rate was 19 which was slightly below the rate for England and Wales as a whole.

The Sanitary Section of the Department has dealt with a particularly heavy load of work and is now faced with additional duties under the proposed new Offices, Shops and Railway Premises Act. An increased work load has also been evident in the Home Nursing Section and in the demand for sickroom equipment, especially wheelchairs.

It is evident that qualified staff are harder to obtain now than was the case some years ago and it seems likely that this will continue: an effort has been made therefore to improve the training facilities in some sections of the department: local authority employment makes heavy demands on technical and administrative staff and it is necessary in a period of expansion such as is now taking place to budget not only for money but also for personnel able to give good and loyal service: facilities for training and for ensuring that the careers offered in the public service compare reasonably with those in other walks of life must be given priority. It is significant that the average age of the senior personnel in local government is increasing and that this work seems less attractive to able young men than was at one time the case.

In a year when there has been manifest unrest amongst some of the personnel in the Health Service it is perhaps pertinent to remember that the great majority of doctors and others have carried out an enormous volume of work carefully and conscientiously, putting the needs of the patient and of the public service first.

I wish again to record my thanks to the members of the Council, to my medical colleagues in the town and to the staff of the Department for great support and help during the year.

G. N. M. WISHART,

Medical Officer of Health.

Section I

STATISTICS

GENERAL STATISTICS

						1963	1964
Area of County Borough (including Foreshore) (acres)				...	...	18,333	18,333
Area of County Borough (excluding Foreshore) (acres)				...	...	9,426	9,426
Population (1961 Census Report)	...	...	...	...	...	82,004	82,004
Population (estimated by the Registrar General) mid-year				...	...	80,160	80,080
Density of Population per acre (excluding Foreshore)				...	...	8.5	8.5

VITAL STATISTICS

		1963	1964				
Live Births	Males	612	595	Total	...	...	...
	Females	484	510		...	...	1,096
	Rate per 1,000 population	...	...	...	...	...	13.67
							13.79
Illegitimate Live Births	per cent of total live births			...	...	...	7%
Stillbirths	Number	...	...	...	...	...	20
	Rate per 1,000 total live and stillbirths	...	...	...	...	...	17.81
							21.26
Total live and stillbirths	...	...	...	...	...	...	1,116
Infant Deaths (under 1 year)	...	...	...	...	...	...	29
Infant Mortality Rates:							21
	Total Infant Deaths per 1,000 total live births	...	...	...	...	...	26.46
	Legitimate Infant Deaths per 1,000 legitimate live births	...	...	...	...	...	27.48
	Illegitimate Infant Deaths per 1,000 live births	...	...	...	...	...	13.00
							13.89
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	...	...	...	...	...	...	20.98
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	...	...	...	...	...	...	20.07
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	...	...	...	...	...	...	37.63
Maternal Mortality (including abortion)							
	Number of Deaths	...	...	...	...	...	Nil
	Rate per 1,000 total live and stillbirths	...	...	...	...	...	—
							0.88
Adjusted Birth Rate per 1,000 population (area comparability factor)	...	...	...	...	...	16.40	16.55
					...	(1.20)	(1.20)
Birth Rate for England and Wales	...	...	...	...	...	18.2	18.4
Deaths of Infants under 1 day old	...	...	...	...	...	11	7
Infant Mortality Rate per 1,000 births for England and Wales				...	...	20.90	20.00

		1963	1964				
Deaths	Males	702	641	Total	...	...	...
	Females	800	819		...	...	1,502
	Rate per 1,000 population	...	...	...	...	...	18.74
							18.23
Adjusted death rate per 1,000 population (area comparability factor)	...	...	...	...	...	13.12	12.76
				...	...	(0.70)	(0.70)
Death Rate for England and Wales	...	...	...	...	...	12.20	11.30
Excess of Deaths over Registered Births				...	...	406	355

VITAL STATISTICS

Comparison of Birth, Death and Infantile Mortality Rates for England, Wales and Southport for Period 1871 to 1964

PERIOD	BIRTH RATE (per 1,000 population)		DEATH RATE (per 1,000 population)	INFANTILE MORTALITY RATE (per 1,000 live births)	EXPECTATION OF LIFE			
	England & Wales	Southport						
1871—1880	35.4	30.69	21.4	23.43	149	161		
1881—1890	32.4	24.37	19.1	17.78	142	132		
1891—1900	29.9	22.31	18.2	17.23	153	143		
1901—1910	27.2	17.49	15.4	14.43	128	121		
1911—1920	21.8	13.95	14.4	13.86	100	84	M.—48; F.—52	
1921—1930	18.3	12.71	12.1	12.66	72	65		
1931—1940	14.9	10.30	12.3	15.07	59	56		
1941—1950	16.9	12.68	12.4	15.59	43	39		
1951	15.4	*11.96	12.5	*14.70	30	41		
1952	15.3	*12.22	11.3	*12.32	28	30		
1953	15.4	*12.23	11.4	*12.07	27	21	M.—66; F.—71	
1954	15.1	*12.31	11.3	*11.34	25	35		
1955	15.0	*12.64	11.7	*13.20	24.9	35		
1956	15.7	*13.12	11.7	*12.16	23.8	27		
1957	16.1	*13.41	11.5	*11.98	23.0	24		
1958	16.4	*13.67	11.7	*12.74	22.5	21		
1959	16.5	*14.32	11.6	*12.51	22.0	20		
1960	17.1	*14.87	11.5	*12.84	21.7	34		
1961	17.4	*15.11	12.0	*13.34	21.4	17		
1962	18.0	*14.86	11.9	*12.69	20.7	20.7		
1963	18.2	*16.40	12.2	*13.12	20.9	26.4		
1964	18.4	*16.55	11.3	*12.76	20.0	19.0		

*Corrected Rates

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1964

CAUSES OF DEATH	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years							
					1-	5-	15-	25-	35-	45-	55-	65-
1 Tuberculosis—Respiratory...	M	4	—	—	—	—	—	1	—	1	2	—
	F	3	—	—	—	—	—	—	—	1	1	1
2 Tuberculosis—Other ...	M	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	—	—	—	1	—	—
3 Syphilitic Disease ...	M	4	—	—	—	—	—	—	—	—	—	3
	F	1	—	—	—	—	—	—	—	—	—	1
4 Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—
5 Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—
6 Meningococcal Infections ...	—	—	—	—	—	—	—	—	—	—	—	—
7 Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—
8 Measles	—	—	—	—	—	—	—	—	—	—	—	—
9 Other Infective and parasitic diseases	M	2	—	—	—	1	—	—	—	1	—	—
	F	—	—	—	—	—	—	—	—	—	—	—
10 Malignant Neoplasm, Stomach	M	11	—	—	—	—	—	—	—	1	1	4
	F	22	—	—	—	—	—	—	—	1	4	7
11 Malignant Neoplasm, lung bronchus	M	33	—	—	—	—	—	—	1	3	4	18
	F	12	—	—	—	—	—	—	—	3	3	6
12 Malignant Neoplasm, breast	M	—	—	—	—	—	—	—	—	—	—	—
	F	18	—	—	—	—	—	—	2	2	4	6
13 Malignant Neoplasm, uterus	F	7	—	—	—	—	—	—	—	1	1	2
14 Other Malignant and Lymphatic Neoplasms ...	M	55	—	—	—	1	—	—	2	7	27	18
	F	67	—	—	—	—	1	—	1	14	19	32
15 Leukaemia	M	2	—	—	—	1	—	—	—	—	1	—
	F	7	—	—	—	—	—	—	4	2	—	1
16 Diabetes	M	2	—	—	—	—	—	—	—	—	1	1
	F	6	—	—	—	—	—	—	1	1	1	3
17 Vascular lesions of Nervous System	M	76	—	—	—	—	1	1	1	17	26	30
	F	157	—	—	—	—	—	2	5	12	29	109
18 Coronary Disease—Angina	M	191	—	—	—	—	—	4	14	44	74	55
	F	141	—	—	—	—	—	—	4	17	41	79
19 Hypertension with Heart Disease	M	5	—	—	—	—	—	—	—	1	3	1
	F	6	—	—	—	—	—	—	1	1	—	4
20 Other Heart Disease ...	M	56	—	—	—	—	—	—	1	1	4	38
	F	137	—	—	—	—	—	—	1	5	13	104

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1964-*continued*

CAUSES OF DEATH	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years									
					1-	5-	15-	25-	35-	45-	55-	65-	75 & over	
21 Other Circulatory Disease ...	M	20	—	—	—	—	—	—	—	1	4	5	10	
	F	46	—	—	—	—	—	—	—	—	3	8	35	
22 Influenza	M	—	—	—	—	—	—	—	—	—	—	—	—	
	F	1	—	—	—	—	—	—	—	—	—	—	1	
23 Pneumonia	M	22	—	—	—	—	—	—	—	1	7	3	11	
	F	25	—	—	1	—	—	—	—	—	—	5	19	
24 Bronchitis	M	61	—	2	—	—	—	—	—	1	7	23	28	
	F	22	—	—	—	—	—	—	—	—	1	6	15	
25 Other Diseases of Respiratory System	M	6	—	1	—	—	—	—	—	—	—	2	3	
	F	3	—	—	—	—	—	—	1	—	—	1	1	
26 Ulcer of Stomach and Duodenum ...	M	13	—	—	—	—	—	—	—	—	4	4	5	
	F	3	—	—	—	—	—	—	—	1	—	—	2	
27 Gastritis, Enteritis and Diarrhoea ...	M	2	—	1	—	—	—	—	—	—	—	1	—	
	F	4	—	1	—	—	—	—	—	—	2	—	1	
28 Nephritis and Nephrosis ...	M	3	—	—	—	—	—	—	1	—	—	1	—	
	F	3	—	—	—	—	—	—	—	—	2	1	—	
29 Hyperplasia of Prostate ...	M	7	—	—	—	—	—	—	—	—	—	3	4	
30 Pregnancy, Childbirth, Abortion	F	1	—	—	—	—	1	—	—	—	—	—	—	
31 Congenital Malformations ...	M	4	2	1	—	—	—	—	1	—	—	—	—	
	F	3	1	—	2	—	—	—	—	—	—	—	—	
32 Other defined and ill-defined Diseases	M	41	6	—	—	—	1	—	1	2	10	8	13	
	F	77	4	1	—	2	—	—	4	3	6	23	34	
33 Motor Vehicle Accidents ...	M	6	—	—	—	1	2	—	1	—	—	—	2	
	F	3	—	—	—	—	—	—	—	—	—	2	1	
34 All Other Accidents ...	M	11	—	—	1	—	—	—	1	1	3	2	4	
	F	41	—	1	2	—	—	—	1	2	5	3	27	
35 Suicide	M	4	—	—	—	—	—	1	—	1	—	2	—	
	F	2	—	—	—	—	—	—	1	1	—	—	—	
36 Homicide and Operations of War	M	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	
TOTALS—All Causes ...	M	641	8	5	—	2	5	4	10	31	116	223	237	
	F	819	5	3	5	2	1	1	12	30	84	187	489	
TOTALS—MALE AND FEMALE ...		—	1460	13	8	5	4	6	5	22	61	200	410	726

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES

CAUSE OF DEATH	1964		1963	
	Number	% of total deaths	Number	% of total deaths
Heart Disease including diseases of the circulatory system	602	41.23	621	41.34
Cancer	284	16.03	242	16.11
Vascular Lesions of nervous system... ...	233	15.96	203	13.52
Respiratory Diseases...	140	9.59	181	12.05
Violence, including suicide	67	4.59	74	4.93
Ulcer of Stomach and Duodenum	16	1.09	12	0.80
Tuberculosis, all forms	8	0.55	11	0.73
All Other Causes	160	10.96	158	10.52
 Totals	1,460	100.00	1,502	100.00

DEATHS DUE TO VIOLENCE, Year 1964

Classification	Male	Female	Totals
Motor Vehicle Accidents	6	3	9
All other accidents	11	41	52
Suicide	4	2	6
Homicide and Operations of War	—	—	—
 Totals	21	46	67

Age Groups	0—15 yrs.		15—65 yrs.		65 and over	
	M.	F.	M.	F.	M.	F.
Motor Vehicle Accidents	3	—	1	—	2	3
All other accidents	—	3	5	8	6	30
Suicide	—	—	2	2	2	—
Homicide and Operations of War ...	—	—	—	—	—	—
 Totals	3	3	8	10	10	33

DEATHS

Numbers and Rates per 1,000 population and per 1,000 births—years 1955—1964

Year	Popu- lation	INFANTS			Rate per 1,000 Popu- lation	Rate per 1,000 Popu- lation	
		Male	Female	Total	Cor- rected for Age and Sex	Rate per 1,000 Popu- lation	Rate per 1,000 Popu- lation
1955 ...	82240	682	870	1552	18.87	13.20	32
1956 ...	82100	637	750	1387	16.89	12.16	26
1957 ...	81900	636	708	1344	16.41	11.98	24
1958 ...	81760	646	777	1423	17.45	12.74	21
1959 ...	81370	603	773	1376	16.91	12.51	21
1960 ...	81350	648	783	1431	17.59	12.84	36
1961 ...	81020	656	824	1480	18.27	13.34	19
1962 ...	80730	661	831	1492	17.24	12.69	22
1963 ...	80160	702	800	1502	18.74	13.12	29
1964 ...	80080	641	819	1460	18.23	12.76	21
						19	20
						14	14
						7	7
						0.09	1
							0.01

CANCER

Localisation of Disease and Number of Deaths for years 1955 to 1964

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
Stomach and Duodenum	41	27	22	27	32	30	28	38	24	33
Lung Bronchus	44	49	45	54	37	39	51	61	64	45
	(Male 37)	(Male 45)	(Male 40)	(Male 45)	(Male 32)	(Male 32)	(Male 43)	(Male 46)	(Male 54)	(Male 33)
	(Female 7)	(Female 4)	(Female 5)	(Female 9)	(Female 5)	(Female 7)	(Female 8)	(Female 15)	(Female 10)	(Female 12)
Breast	25	24	26	13	28	28	25	31	26	18
Uterus	12	8	5	11	14	5	10	13	9	7
Other Sites	135	107	141	99	127	115	98	113	112	122
Leukaemia	3	8	7	6	2	7	6	6	7	9
Total Deaths From Cancer	260	223	240	210	240	224	218	262	242	234
Total Deaths All Causes	1552	1387	1344	1428	1376	1431	1480	1492	1502	1460
% of Total Deaths	16.75	16.08	17.85	14.75	17.44	15.65	14.73	17.56	16.11	16.03

MATERNAL MORTALITY FOR YEARS 1955 TO 1964

Year	No. of Live Births	No. of Live and Stillbirths	MATERNAL DEATHS RATES PER 1,000 LIVE AND STILLBIRTHS				Total	
			Sepsis		Other Causes		No.	Rate
			No.	Rate	No.	Rate		
1955	912	933	—	—	1	1.07	1	1.07
1956	945	984	—	—	1	1.02	1	1.02
1957	972	994	—	—	—	—	—	—
1958	989	1019	—	—	—	—	—	—
1959	1031	1059	—	—	—	—	—	—
1960	1071	1094	—	—	1	0.91	1	0.91
1961	1091	1121	—	—	—	—	—	—
1962	1062	1079	1	0.93	—	—	1	0.93
1963	1096	1116	—	—	—	—	—	—
1964	1105	1129	—	—	1	0.88	1	0.88

ANALYSIS OF LIVE PREMATURE BIRTHS FOR YEAR 1964

Weight at birth	Born in hospital	PREMATURE LIVE BIRTHS						PREMATURE STILL BIRTHS					
		Born at home or in a nursing home			Transferred to hospital on or before 28th day			Born					
		Nursed, entirely at home or in a nursing home		Died	Total births	within 24 hours of birth (5)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births	within 24 hours of birth (10)	in 1 and under 7 days (11)	in 7 and under 28 days (12)	In hospital (13)	at home or in a nursing home (14)
1. 2 lb. 3 oz. or less	1	1	—	—	—	—	—	—	—
2. Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	3	2	—	—	1	—	—	—	—
3. Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	9	—	1	—	—	—	—	—	—
4. Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	23	1	—	—	1	—	—	—	2
5. Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	22	—	—	—	5	—	—	—	4
6. Total	58	4	1	—	7	—	—	—	18

INFANT MORTALITY

Number of Deaths from Stated Causes at Various Periods
Under 1 Year of Age for Year 1964

CAUSE OF DEATH	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7-13 days	14-20 days	21-28 days	28 days -2 mths.	2 mths.	3 mths.	4 mths.	5 mths.	6 mths.	7 mths.	8 mths.	9 mths.	10 mths.	11 mths.	Total under 1 year
Prematurity	3	1	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6
Congenital Heart Disease	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	3
Intra Cranial Haemorrhage	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Catarrhal Bronchitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Atelectasis	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Intra Uterine Asphyxia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Asphyxia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Anencephalic Foetus	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Pulmonary Congestion	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Inanition associated with hypothermia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Gastro-enteritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
TOTALS	7	1	—	—	1	—	3	1	—	1	3	2	—	2	—	—	—	—	—	—	—	21

CONGENITAL MALFORMATIONS

29 cases of congenital malformations occurring in Southport children were reported during the year, 17 males and 12 females. Of these 5 males and 3 females were stillborn, and 2 males and 1 female died.

CLASSIFICATION OF CASES REPORTED IN 1964

		LIVE		STILLBORN		DEATHS	
		M	F	M	F	M	F
CENTRAL NERVOUS SYSTEM							
Anencephalus	—	1	3
Hydrocephalus	—	—	2
Microcephalus	—	—	1
Defects of spinal cord NOS	1	1	—	—
Spina Bifida	1	—	—
ALIMENTARY SYSTEM							
Other defects of alimentary system	1	—	—	—	—
HEART AND GREAT VESSELS							
Congenital heart disease NOS	2	—	—	—	1
Transposition of great vessels	1	—	—	—	1
URO-GENITAL SYSTEM							
Hypospadias	4	—	—	—
LIMBS							
Defects of lower limb NOS	—	1	—	—	—
Polydactyly	1	—	—	—
Syndactyly	1	1	—	—
Dislocation of hip	—	2	—	—
Talipes	1	2	—	—
OTHER SYSTEMS							
Vascular defects of skin	—	2	—	—	—
Exomphalos	—	—	—	1	—
OTHER MALFORMATIONS							
Mongolism	—	1	—	—

The arrangements for the collection of this information work well, due largely to the good co-operation with the staffs of the maternity hospitals to the Matrons of which I am particularly indebted.

Section II

PERSONAL HEALTH SERVICES

CARE OF EXPECTANT AND NURSING MOTHERS

Ante-Natal Care

A weekly Ante-Natal Clinic was held at 44 Hoghton Street during 1964 for those mothers who had booked to have their confinements at home and also for mothers who were to be admitted to the St. Katharine's Maternity Hospital. This clinic is conducted by Mr. A. G. Wilson, one of the Obstetric Consultants for the two maternity hospitals in the town. The Matron or Deputy Matron of the St. Katharine's Maternity Hospital and the non-medical Supervisor of Midwives also do duty at this clinic. In addition, the domiciliary midwives attend in rotation to meet their own patients.

Subject to the consent of the general practitioner concerned, mothers who have booked with their family doctor may attend this clinic to obtain additional ante-natal care. Mothers who attend have a blood test for Kahn reaction, haemoglobin estimation, blood grouping and are examined for Rhesus factor as a routine measure.

Maternity outfits are supplied free of cost to all mothers who are having their first confinements at home.

The Hospital bed accommodation is such that almost all mothers wishing to have their babies in hospital are able to do so.

ANTE-NATAL CLINICS—YEAR 1964

Post-Natal Care

All mothers who have not made arrangements to be examined by their own doctors are invited to attend the Post-Natal Clinic which is held each week at 44 Hoghton Street. The Clinic is also conducted by Mr. A. G. Wilson, the Consultant Obstetrician.

POST-NATAL CLINICS—YEAR 1964

No. of women who attended the clinic for the first time during the year ...	442
No. of attendances made by mothers during the year	493
No. of sessions held by hospital medical staff during the year	52
No. of sessions by health visitors during the year	52

There is a growing tendency for mothers to come home from maternity hospital before the tenth day after the birth: the arrangements for the continuing of proper care for the mother and baby in Southport are at present under review but no great difficulty has so far become apparent.

The number of mothers discharged before the tenth day in 1964 was 265.

Care of Premature Infants

The decision as to whether a premature infant can be nursed satisfactorily in its own home lies with the doctor in attendance and if he considers that removal of the infant to one of the maternity hospitals is advisable, this step is carried out, the infant being removed in a special incubator which is available for the purpose. Special cots are also supplied on loan to mothers who are nursing their infants at home.

A close liaison is maintained between the Matrons of the lying-in-hospitals and the Superintendent Health Visitor in respect of premature births and before such an infant is discharged from the maternity hospital, the necessary information is passed on to the Superintendent Health Visitor who, with her staff, accepts responsibility for the care of the child after discharge under the general direction of the Family Doctor.

Frequent visits are made by one of the district health visitors until the infant reaches normal weight and after this stage the usual routine visits are made as in other cases.

The table on page 18 shows the number of premature infants born during the year.

CARE OF CHILDREN UNDER SCHOOL AGE

Child Welfare Centres

There are seven Centres in the town and in addition to the normal work, each Clinic distributes the dried milk and vitamin foods issued by the Ministry of Health. As in the past the Ladies of the Voluntary Infant Welfare Committee provided clerical and other assistance at the Centres during 1964 and their efforts and enthusiasm contributed in no small measure to the steady progress which was maintained throughout the year.

The seven Welfare Centres are so situated that they provide a convenient service for mothers living in any part of the town.

One session each week is held at the Centres at Ainsdale, Crossens, Derby Road and Marshside and two sessions each week are held at the Centres at Hampton Road, Lincoln House and Poulton Road. The second session at Lincoln House had to be started in October because of the large number of mothers and children attending the Centre.

In April, the Borough Architect agreed a cost limit with the Ministry of Health for the building of a new Child Welfare Centre in Sandbrook Road, Ainsdale, and in November the Council approved the acceptance of tenders for the work. It is hoped that the new Centre will be opened sometime in 1966 and it will replace the temporary Centre which has been held for many years at the Methodist Church in Ainsdale.

This is a further step to implement the Council's policy to replace all temporary Child Welfare Centres by purpose-built Centres. The ones still to be dealt with in this way are those at Derby Road and Marshside Road.

Mothers' Club

Early in the year the Health Visitor for the Ainsdale district, Miss A. Phillips, suggested that there was a need for an evening social and recreational club for the benefit of the young mothers living in the area. The Health Committee agreed that the Training and Industrial Centre could be used for this purpose and Miss Phillips volunteered to make herself responsible for the supervision and organisation of the meetings.

The first meeting was held in April when 40 young mothers attended and from the start the venture was a great success. By the end of the year 26 meetings had been held with an average attendance of 60 mothers; the attendance did not fall below 40 throughout the year and at one meeting, 88 mothers were present.

The activities included lectures, demonstrations, handicrafts, dressmaking and keep-fit classes; in addition trips were arranged at times other than the usual day of the weekly meeting. Miss Phillips continues to organise the club and she is helped by a Committee formed by the mothers. The handicraft work has been supervised by Mrs. Phillips who very kindly volunteered to do this work for the club. Other developments include arranging for a "sick visitor", who is a member of the club, to call on any other members who are seriously ill to see whether any help can be provided, and visiting mothers in the area who have new babies.

It is obvious that this club is making a very valuable contribution to the health services which are available in the area, and the enthusiasm of the mothers and the regular large attendances at each meeting clearly show that the scheme has been appreciated. Miss Phillips originated the idea of forming such a club and she deserves the highest praise for all the hard work she has given, in her own time, to ensure that the venture has been such a great success.

Dental Care and Treatment

Sessions are held each week at 2 Church Street for expectant and nursing mothers and children under 5 years of age who are not attending primary schools maintained by the local Education Authority.

When dentures are required by nursing mothers, arrangements are made with private dental mechanics in the town.

DENTAL CLINIC—YEAR 1964

Number of patients examined and treated

	No. of persons examined during the year (1)	No. of persons who commenced treatment during the year (2)	No. of courses of treatment completed during the year (3)
Expectant and Nursing Mothers	24	24	9
Children aged under 5 and not eligible for school dental service	210	130	112

Classification of treatment provided

	Scalings and Gum Treat- ment (1)	Fillings (2)	Silver Nitrate Treat- ment (3)	Crowns and Inlays (4)	Ex- trac- tions (5)	Gen- eral Anaes- thetics (6)	Dentures Provided		Radio- graphs (9)
							Full Upper or Lower (7)	Partial Upper or Lower (8)	
Expectant and Nursing mothers	6	42	—	—	64	5	5	5	1
Children aged under 5 and not eligible for school dental services	3	265	24	—	115	39	—	—	—

Distribution of National Welfare Foods

Quantities of National Welfare Foods Sold during 1964

		National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin 'A' & 'D' Tablets
		Tins	Bottles	Bottles	packets
HEALTH DEPARTMENT—					
Counter Issues ...	...	2,411	6,922	385	1,414
Issues to National Health Service Institutions ...	...	48	72	—	—
Issues to Day Nurseries ...	...	—	72	56	—
Total Sales from Health Department	...	2,459	7,066	441	1,414
CHILD WELFARE CENTRES—					
Ainsdale ...	...	271	1,674	149	161
Lincoln House ...	...	297	1,475	174	170
Crossens ...	...	21	776	54	37
Poulton Road ...	...	326	1,418	141	99
Hampton Road ...	...	297	1,671	210	276
Marshside Road...	...	139	1,111	107	117
Derby Road ...	...	85	723	117	51
Total Sales from Child Welfare Centres	...	1,436	8,848	952	911
GRAND TOTALS	...	3,895	15,914	1,393	2,325

Day Nurseries

There are two Day Nurseries in the town, one being in Talbot Street with accommodation for 60 children, and one in Bedford Park with accommodation for 40 children. The daily fees which had been charged since 1st October, 1962, viz: 2/- minimum and 9/6 maximum continued throughout 1964.

These fees, however, may be reduced in cases of financial hardship and in this regard it is interesting to note that at the end of the year, the average daily payment made by the mothers was 4/8d. for each child attending the Day Nurseries.

It is pleasing to note that all the four students who completed the two year course which commenced in September, 1962 and terminated in 1964, were successful in obtaining the Certificate of the National Nursery Examination Board.

The Nursery Nurses' Training Scheme was continued in 1964 in conjunction with the Education Committee with 4 students who were appointed for the two year course commencing in September, 1964.

Attendances at the Day Nurseries during 1964

	Southport	Bedford Park	Totals
Number of places provided	60	40	100
Total attendances	13586	8279	21865
Number of days open	255	255	255
Average daily attendance	53	32	85

Physiotherapy Service

Relaxation classes were held throughout the year for expectant mothers and also for mothers attending the post-natal clinic.

Relaxation Classes—Year 1964

	<i>Ante-Natal</i>	<i>Post Natal</i>
No. of women who attended for the first time during the year:		
St. Katharine's Maternity Hospital	56	406
Christiana Hartley Maternity Hospital	64	749
District cases	2	1
Attended Physiotherapy only	13	2
 Total No. of cases	 135	 1,158
 No. of attendances during the year	 261	 1,236
 No. of sessions held by physiotherapist during the year ...	 44	 47

Care of Unmarried Mothers

Unmarried mothers who seek the help of the Department are referred to the Obstetric Specialist at the ante-natal clinic at 44 Hoghton Street, and arrangements are then made for the confinement to take place either in the girl's own home or in a maternity hospital. She is also advised to continue to attend either the ante-natal clinic at 44 Hoghton Street or the appropriate hospital ante-natal clinic.

At the same time, the mother is seen by the Moral Welfare Worker so that if necessary appropriate arrangements can be made for residential ante and post-natal care. In such cases the Health Authority will accept responsibility for the maintenance of the mother in a voluntary home usually for 6 weeks during the ante-natal period and up to 13 weeks during the post-natal period. The amount paid by the Health Committee to the voluntary home is the total cost of the maintenance less any payment which the mother is able to make towards her keep.

The Moral Welfare Worker co-operates with the Superintendent Health Visitor, so that the Health Visiting Staff can keep in touch with the girl both before and after the baby is born. During the year, the Moral Welfare Worker dealt with 59 new cases and the Health Committee paid the maintenance costs in voluntary homes for 9 mothers during the ante and post-natal period.

It is significant that in 1964 the illegitimate babies' infant mortality rate was considerably less than the rate for babies born in wedlock.

ATTENDANCES AT CHILD WELFARE CENTRES—YEAR 1964

	Marsh-side	Hamp-ton Road	High Park	Lincoln House	Cros-sens	Derby Road	Ains-dale	TOTAL
No. of children who attended during the month who have not attended previously this year:								
Born in 1964 ...	69	194	134	114	68	130	88	797
1963 ...	67	184	153	138	62	125	92	821
1959-62 ...	101	238	250	216	133	201	168	1,307
TOTALS ...	237	616	537	468	263	456	348	2,925
Total attendances during the year	1,750	3,413	3,073	2,549	1,668	2,301	1,901	16,655
No. of sessions during the year	48	96	94	59	46	47	47	437
Average attendances per session	36	36	33	43	36	49	40	38
No. of children referred for special treatment or advice as a result of a medical examination ...	3	46	6	27	—	25	2	109
No. of children placed on "at risk" register	12	51	39	36	11	32	10	191 } 83 }
Children not attending Centres								
No. of sessions by:								
Medical Officers ...	39	89	92	58	46	47	—	371
General Practitioners employed on sessional basis	—	7	—	—	—	—	47	61
Hospital Medical Staff								
Health Visitors (with doctor)	96	289	188	159	92	156	94	1,074
Health Visitors (without doctor) ...	2	—	2	1	—	—	—	5

Training in Home Management

As mentioned in the 1963 Annual Report, arrangements were made in January for a mother and daughter aged 3 years to be admitted to Brentwood Recuperative Centre, Marple, Cheshire, for a period of four weeks with a view to extension, if necessary.

However, this mother took her own discharge before the month was up and after considering a detailed report from the Centre it was felt that this could not be regarded as a failure on the part of Brentwood, as this mother proved to have been unsuitable for such care.

DISTRICT MIDWIFERY

The staff consists of a non-medical Supervisor of Midwives and three full-time midwives. All the staff are fully qualified to administer analgesia, i.e. gas and air and trilene, and are in possession of the necessary apparatus. Patients wishing to book for home confinement may do so at the Ante-Natal Clinic, 44 Hoghton Street, or directly with the midwife for the area in which they live. Arrangements can be made for patients who

have not engaged the services of their own doctor to have ante-natal care from the obstetrician in attendance at the Clinic which is held on Thursday afternoons. Regular visits are made by the midwives irrespective of having engaged a doctor to attend under the Maternity Medical Service. Arrangements can also be made for all patients to have routine blood tests carried out. The domiciliary midwives also visit certain patients who have been delivered in hospital but have been discharged home before the 10th day. Notification of these discharges is sent to the Health Dept. by the Matrons of the individual Maternity hospitals.

A number of the doctors conducting their own ante-natal Clinics have the assistance of the domiciliary midwives at these clinics. In this way a firm liaison is formed between doctor, midwife and patient, which is invaluable to the patient's welfare.

The case load is not considered to be large and no night rota system is in operation because it is felt that in these cases each midwife prefers to deal with her own patient.

DISTRICT MIDWIFERY—YEAR 1964

Midwives in Private Practice

During the year one private midwife notified her intention to practise on the district. One case was dealt with by this midwife.

Maternity Nursing Homes—The following table shows the number of maternity cases dealt with by private nursing homes during the year:—

Number of deliveries 1
 Number of practising midwives employed at 31st December, 1964 2
 Number of midwives above who are qualified to administer gas and
 air analgesia

Maternity Hospitals

The two maternity hospitals in the town are administered by the Southport and District Hospital Management Committee and the following table shows the number of patients during 1964. These figures are for residents and non-residents of Southport.

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	TOTAL
(1) Number of patients	942	444	1386*
(2) Number of patients in (1) above for whom medical aid was summoned ...	184	—	184
(3) Number of practising midwives on the staff at the end of the year... ...	14	9†	23
(4) Number of midwives in (3) above who are qualified to administer gas and air analgesia	14	9	23

*Includes 920 Southport residents and 466 non-residents.

†6 full-time and 3 part-time.

Distribution of Maternity Cases

The following table shows the percentage of maternity cases dealt with during 1964 by the various services, and similar figures are also shown for the previous year. These figures are for mothers who were resident within the area of the Southport County Borough.

	1964		1963	
	No. of Cases	%	No. of Cases	%
District				
Municipal Midwives	134	12.6	134	13.4
Private Midwives	1	.1	—	—
TOTALS (a)	135	12.7	134	13.4
Institutions				
Christiana Hartley Mat. Hospital	596	56.4	528	52.8
St. Katharines Maternity Hospital	324	30.6	331	33.1
Nursing Homes	1	.1	3	0.3
Southport Infirmary	2	.2	4	0.4
TOTALS (b)	923	87.3	866	86.6
GRAND TOTALS (a) and (b)	1058	100.0	1000	100.0

Training for the Second Part of the Certificate of the Central Midwives Board

During the year, midwifery training of this kind was continued. The scheme is a combined one, operated by the Southport and District Hospital Management Committee and the Southport and Preston Local Authorities. Some of the students do their domiciliary training in Southport and some in Preston. The school has done well but there are certain inherent difficulties, one of which is the relatively small number of Southport mothers who elect to have their babies at home.

Six pupils completed district training in the area during the year and two pupils were in training at the end of the year.

HEALTH VISITING

The Health Visiting Service provides general care for nursing and expectant mothers and young children and in addition, is available for the purpose of giving advice to persons of all ages in the town who are suffering from illness. The Health Visitors also assist families by providing them with information concerning the other health services which are available.

The present establishment consists of a Superintendent Health Visitor, who also supervises the school nursing work, 1 Senior Health Visitor, 2 Clinic Nurses, 1 Tuberculosis Health Visitor, 2 Nurses for Elderly People, and 12 Health Visitors/School Nurses, making a total of 19.

The Health Committee agreed to sponsor two further students for Health Visitor training which began in September.

Each of the 12 Health Visitors/School Nurses is responsible for a district and based on the estimated figures for the year 1964, the average case load of the 0-14 years age group is 1,192.

Other work which falls to the lot of the Health Visitor is that of dealing with the non-medical after-care of patients discharged from Hospital, the arranging of home help and similar duties. These specially trained nurses are being increasingly called upon to undertake Health Education.

Work done by Health Visitors during 1964:—

	Cases visited by health visitors	Number
1	Children born in 1964	1,274
2	Children born in 1963	1,384
3	Children born in 1959-62	2,792
4	Total number of children in lines 1-3	5,450
5	Persons aged 65 or over	1,353
6	Number included in line 5 who were visited at the special request of a G.P. or hospital	646
7	Mentally disordered persons	14
8	Expectant Mothers	799
9	Other cases	439
10	Number included in line 7 who were visited at the special request of a G.P. or hospital	1
11	Persons, excluding Maternity cases, discharged from hospital (other than mental hospitals)	322
12	Number included in line 9 who were visited at the special request of a G.P. or hospital	301
13	Number of tuberculous households visited	2
14	Number of households visited on account of other infectious diseases	9
15	Number of tuberculous households visited by tuberculosis visitor	280

Attendances at Clinics and Centres by Health Visitors during 1964:—

Child Welfare Centres	...	...	...	...	...	...	1,150
Post-Natal Clinic, Christiana Hartley Maternity Hospital	...	...	...	...	...	...	68
B.C.G. Clinics	...	...	...	...	...	...	4
Geriatric Out-Patients' Clinic, Promenade Hospital	...	...	...	...	...	...	161
Paediatric Clinic, Southport Infirmary	...	...	...	...	...	...	122
V.D. Clinic, Southport Infirmary	...	...	...	...	...	...	22
Ante-Natal Clinic, St. Katharines Maternity Hospital	...	...	...	...	...	...	29
Total number of clinic attendances made by Health Visitors						...	1,556

Regular in-service training was given to members of the staff chiefly by means of the showing of films illustrated by short talks.

Mothercraft classes were held in schools and welfare centres. Lectures and informal talks have been given to various groups of persons and associations by members of the staff.

Co-operation with General Medical Practitioners and After-care arrangements

This is highly developed in connection with the geriatric service and works well because the two Health Visitors concerned attend the geriatric hospital clinic and are also in direct touch with individual Family Doctors. As regards general Health Visiting, it is planned that the District Health Visitors will be based in Welfare Centres in different parts of the town and be available directly to the Family Doctors in the area reporting either directly to them or acting as liaison officers with the Public Health Department, so that other ancillary services can be provided where necessary. Some interest has been shown by a small number of Family Doctors who would like the services of a Health Visitor in their own surgeries but this is more difficult to arrange.

Prevention of the Break-Up of Families

A Sub-Committee with representatives from the Health, Estates, Welfare, Children's and Finance Committees, is available to consider serious individual family problems, when it seems probable that the best solution can only be found by concerted action by a number of Committees.

Screening for Phenylketonuria.

The following table gives details of the tests which were carried out during 1964:—

No. of Tests	No. positive to screening Tests	Results of further investigation	
		Phenylketonuria confirmed	Phenylketonuria not confirmed
1009	2	1	1

HOME NURSING

The Home Nursing Service is a statutory duty of the Local Health Authority under the provisions of the National Health Service Act 1946.

Since 1948, the Southport Council has provided this service by an agency arrangement with the Southport and Birkdale District Nursing Society, a voluntary body which has existed in the town for many years and has provided district nurses. The Society has members who have served it for very many years and who have done extremely good work for the town.

The Service is administered by a joint sub-committee comprising five members of the Health Committee and five members of the Voluntary Society. This sub-committee meets quarterly and receives reports as to the work done, and authorises repayment to the voluntary society by the Council of the money which has been spent in running the service during the previous three months.

The practical day to day administration is carried out by the Superintendent who is frequently in touch with the department and who appoints her staff after consultation with myself. Requests for nursing services are usually made directly to the District Nurses' Home at 52 Hoghton Street and are made in the main by general medical practitioners, by local authority staff, various voluntary bodies, hospitals and police, etc.

The present establishment is—a Superintendent, a Deputy Superintendent and 17 Nurses; domestic staff is also employed.

Apart from the Superintendent and her Deputy, very little use has been made during recent years of the residential accommodation by the nurses. Also it has been difficult to staff the Home from the domestic point of view with the result that the Superintendent has at times been hard pressed. The trend throughout the country at present is for district nurses not to live in district nurses' homes but to have their own flats or domestic premises away from their working environment.

It has been thought for some time that it would be eventually necessary to review the administration of the Home Nursing Service for two main reasons. Firstly to achieve a closer integration of the work of the district nurses with that done by the other branches of the Local Authority's personal health services, and in particular with the health visiting service and home help service. Secondly to consider the possibility of the Health Committee using the unoccupied accommodation at the District Nurses' Home at 52 Hoghton Street for other branches of the Local Authority's health service.

During the year, therefore, discussions took place with the Trustees and the members of the Voluntary Society and in November a meeting of the Home Nursing Joint Sub-Committee was held, at which it was agreed that subject to the Trustees obtaining the consent of the Charity Commissioners, the buildings, furniture, equipment, and motor cars should be sold to the Corporation. It was also agreed that, as from the date of the sale, the agency agreement should be terminated and that the Health Committee would assume direct responsibility for the administration of the service.

Work done by District Nurses during 1964:—

Total No. of new patients visited during the year (i.e. patients who have not been previously visited this year)	2,153
No. of patients who were aged:	
under 5 years at time of first visit this year...	16
over 65 years at time of first visit this year	1,419
Total No. of visits made by nurses during the year	64,690

No. of patients visited and total visits for years 1959 to 1964:—

Year	Total number of patients visited	Total number of visits
1959	2,455	64,767
1960	2,366	60,090
1961	2,389	60,530
1962	2,345	57,113
1963	2,089	61,777
1964	2,153	64,690

VACCINATION AND IMMUNISATION

The following are the suggested ages when children may be vaccinated and immunised against certain diseases:—

<i>Age</i>	<i>Vaccine</i>	<i>How Given</i>
1 to 6 months	Diphtheria, Tetanus and Whooping Cough	Three injections at intervals of four to six weeks.
7 to 11 months	Poliomyelitis	Three doses by mouth at intervals of four to eight weeks.
18 to 21 months	Diphtheria, Tetanus and Whooping Cough	One 'booster' injection.
1 to 2 years	Smallpox	One injection.
4 to 5 years (School entry)	Diphtheria and Tetanus Poliomyelitis	One 'booster' injection. One dose by mouth.
8 to 12 years	Diphtheria and Tetanus	One 'booster' injection
Over 12 years	Smallpox	One re-vaccination injection.
Normally at 12 years or over	B.C.G. Vaccination against Tuberculosis	One injection if this is found necessary after a skin test.

Smallpox Vaccination

Smallpox vaccination was continued by the General Medical Practitioners as in the previous year on the same lines as for the diphtheria immunisation scheme.

Vaccination was also carried out at Child Welfare Centres and at the Health Department.

During the course of their normal visits, the Health Visitors are required to stress the importance of smallpox vaccination when the baby has attained the age of 12 months. Similar advice is also given at the appropriate times to mothers attending the Welfare Centres; information leaflets are distributed at the Centres and also during the course of home visits.

No. of persons vaccinated and re-vaccinated in 1964:—

Age at date of Vaccination	Number of Persons Vaccinated (or revaccinated during period)		Number of cases specially reported during period		
	Number vaccinated	Number revaccinated	Generalised Vaccinia	Post-Vaccinal Encephalomyelitis	Death from other complications of vaccination
0-3 months	4	—	—	—	—
3-6 months	12	—	—	—	—
6-9 months	7	—	—	—	—
9-12 months	15	—	—	—	—
1	378	1	—	—	—
2-4	20	15	—	—	—
5-14	27	42	—	—	—
15 or over	90	363	—	—	—
TOTALS	553	421	—	—	—

Diphtheria Immunisation

When a baby has attained the age of 3 months, a letter is sent to the mother strongly advising her to arrange for the immunisation of her child. In addition, the Health Visitors are required to visit all mothers whose babies have not been immunised and to make every effort to ensure that the infant is protected against this disease. Posters and leaflets are displayed at Welfare Centres and all children admitted to the Day Nurseries must be immunised.

Follow-up letters are sent at the appropriate times, stressing the need for "reinforcing" injections to maintain immunity throughout school life. Particulars are obtained from the schools each year showing the names of children not immunised and the School Nurses visit the mothers of such children with a view to persuading them to accept immunisation.

In addition to the work done by the General Medical Practitioners, regular immunisation sessions are held at the Health Department and children are also protected in this way at the Welfare Centres.

No. of Immunisations during 1964:—

Children born in years	1964	1963	1962	1961	1960	1955-1959	1950-1954	TOTALS
No. of children who completed a full course... ...	368	485	45	16	10	9	3	936
No. of children who received a secondary (booster) injection	—	104	200	13	63	330	122	832

Immunisations done by	General Practitioners	Health Department Staff	TOTAL
No. of children who completed a full course	341	595	936
No. of children who received a secondary (booster) injection	298	534	832

Poliomyelitis Vaccination

No. of vaccinations during years 1956 to 1964 inclusive:—

Age at 31st Dec., 1964	Under 5 years	5—16 years	16—25 years	Over 25 years	TOTAL
No. who have received two injections ...	1,308	8,639	7,166	8,452	25,565
No. who have received three injections ...	338	7,169	5,729	5,260	18,496
No. who have received four injections ...	—	3,756	5	4	3,765

No. of persons who received oral vaccine during the period April 1962, to December, 1964:—

Age at 31st Dec., 1964	Under 5 years	5—16 years	16—25 years	Over 25 years	TOTAL
No. who have received full course of three doses	2,084	172	195	340	2,791
No. who have received third dose after two injections	772	708	503	2,056	4,039
No. who have received fourth dose after three injections	14	2,001	8	12	2,035

B.C.G. Vaccination

No. of vaccinations for years 1955 to 1964:—

Year	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
No. Vaccinated: At. B.C.G. Clinics	48	45	27	42	56	43	36	34	35	28
Babies seen by the Consultant Paediatrician	10	9	9	24	35	27	28	32	20	37
School Children...	427	391	500	497	698	1037	787	872	716	728
TOTALS	485	445	536	563	789	1107	851	938	771	793

Whooping Cough Immunisation

No. of Immunisations:

Year of Birth of Child	No. of children immunised
1964	345
1963	480
1962	43
1961	14
1960	7
1955—59	6
1950—54	—
TOTAL	895

No. immunised in cases of whooping cough during years 1959 to 1964:

Year	No. of Cases	No. Immunised
1959	113	19
1960	60	12
1961	34	2
1962	15	9
1963	151	44
1964	35	11

AMBULANCE SERVICE

The Ambulance Service continues to be operated by the Fire Brigade under the direct control of the Fire and Ambulance Service Committee, although matters of policy are referred to the Health Committee and monthly information reports in respect of the Ambulance Service are submitted to that Committee.

The Chief Fire Officer is also the Chief Ambulance Officer. The Fire Brigade establishment is augmented by 20 men and 1 woman in consequence of the Ambulance Service commitments, but all personnel of the Brigade take part in both fire and ambulance duties. The Service operates a fleet of 6 ambulances and 3 sitting case cars.

No. of cases removed years 1960 to 1964:

	1960	1961	1962	1963	1964
Total No. of Cases ...	46,574	43,927	43,145	43,135	43,546
Other Work ...	940	1,007	878	994	1,002
GRAND TOTAL ...	47,514	44,934	44,023	44,129	44,548
Mileage	137,736	140,057	136,531	137,006	142,520

Every endeavour continues to be made to keep pace with demand. Any case which may not appear to necessitate an ambulance is checked and the fullest use is made of trains, joint journeys carrying several patients, and other Authorities' ambulances. Unfortunately a large amount of "out of town" work is done where the patient can travel by no means other than ambulance and this restricts one vehicle to one case for several hours, sometimes a whole day, leaving the ambulances left in the Borough working at increased pace to cope with the remainder of the cases.

Railway facilities are used whenever possible but the curtailment of railway services and also the design of new coaches which are difficult for the accommodation of stretcher cases and also for the reservation of compartments for sick persons, will reduce the availability for rail travel in future.

The Chief Officer, the Secretary of the Hospital Management Committee and his staff, meet periodically to solve mutual problems affecting the Service. These meetings, together with liaison with Doctors through the Medical Officer of Health, have reduced wastage and abuse to an absolute minimum.

PREVENTION OF ILLNESS—CARE AND AFTER-CARE

General

The general work done in regard to the prevention of illness, care and after-care is shown in the sections of this report dealing with the Health Visiting, Mental Health and Tuberculosis Services.

Sickroom Equipment

The following equipment is available on loan.

*Air Rings	Dunlopillo mattresses
*Backrests	Electric Page Turner
Beds—Cardiac	Elsan Closets
Beds—Hospital	Enuresis Alarms
*Bed Cradles	Incontinence Pads
*Bed Pans	Lifting Gear
*Bed Table	*Mackintosh Sheets
*Bells	*Portable Oxygen Apparatus
Cantilever Table	Toilet Aids
Commodes	*Urinals
Cot Sides	*Walking Sticks
Crutches	Wheelchairs

* These articles are issued from the District Nurses' Home at 52 Hoghton Street. A small charge is made for the more expensive kinds of equipment but this charge may be reduced or cancelled in cases of hardship.

During 1964 sickroom equipment was supplied to 507 patients as compared with 282 in the previous year. This increase was mainly due to the larger number of elderly patients who had to be supplied with wheelchairs and commodes. Many of these elderly patients were referred to the Department for this kind of help after being seen by the Consultant in charge of the Geriatric Clinic at the Promenade Hospital.

Incontinence Pads

The incontinence pad service for cases of illness being nursed at home was started in February and the first delivery was made to 5 patients. The demand for the service increased throughout the year and during the eleven months from February to December, 86 patients were supplied with nearly 8,500 pads. At the end of the year, 28 patients were receiving this kind of help. The pads are only supplied at the request of either the patient's own doctor, the district nurse or by the two nurses responsible for the geriatric work. No charge is made to patients who are receiving National Assistance but a charge of 3/6d. per week is made to other patients; this charge may be reduced or cancelled where there is financial hardship.

During 1964, 61 patients paid for the pads and 25 received them free of charge. The disposal of the used pads has not caused any difficulties and either the district nurse or the geriatric nurse has been made responsible for ensuring that satisfactory disposal arrangements are available for every patient using the service. The service has been of great help, both to the patients and relatives and also to the district nurses, and has made it possible for a number of these patients to be nursed at home when they would otherwise have had to have been admitted to hospital.

Occupational Therapy

During the year, occupational therapy was provided for 3 geriatric patients and 5 physically handicapped patients and a total of 179 home visits were made by the occupational therapy staff.

Chiropody

(a) *Service for the Elderly*

Prior to the 1st April, 1960, a chiropody service for the elderly had been provided for many years by the Southport Voluntary Old People's Welfare Committee, and they

provided treatment both at clinics and also in patients' own homes. Since 1960 the Voluntary Organisation has continued to provide the service as agents of the Corporation, and the Corporation is responsible for repayment of the net expenditure involved.

The general direction is controlled by a joint sub-committee, 5 members being appointed by the voluntary organisation and 5 members by the local health authority. This sub-committee meets at quarterly intervals to receive reports of the work done and also to approve the financial statements. There is close co-operation between the officers who are concerned with this service both in the health department and from the old people's welfare committee, and the general arrangements for the scheme seem to work satisfactorily.

The service is available for Southport residents who are 60 years of age or over and the minimum charge for those not receiving supplementary pensions is 3s. 0d. per treatment. Those who are receiving supplementary pensions, however, are charged 1s. 6d. per treatment. If for any reason it is considered that these fees would cause financial hardship in any particular case, the charge may be reduced or cancelled.

No. of treatment during 1964:

CLINICS AT 44 HOGHTON ST.	Year 1964	Year 1963
No. of clinics held	768	695
No. of attendances made by patients	8143	7430
Average attendance per clinic session	10.6	10.7
No. of treatments in patients own home	1924	1519

The need for this service continues to grow, and will do so as long as the number of older residents in the town continues to increase.

(b) *Expectant Mothers and Handicapped Persons*

The arrangements continued throughout the year whereby expectant mothers and handicapped persons in need of chiropody treatment and unable to afford to go to a private chiropodist, could be referred to Mr. W. Rogans who is also responsible for the School Health Service Chiropody Clinic.

During 1964, four physically handicapped persons made 55 attendances at Mr. Rogans' clinic. No expectant mothers were referred during the year.

Sickroom Helpers Scheme

Alongside the Home Help Service is the Sickroom Helpers Scheme. This is a little known service which is not often required, and there are only 2 sickroom Helpers on the staff. The purpose of these helpers is to give relief during the night to relatives of patients who are being nursed at home usually while awaiting admission to hospital. The helpers are directly responsible for the care of the patient during their time on duty and must be prepared to obtain medical help should the occasion arise and help in any other way to relieve the anxiety and distress of the patient and the burden on relatives.

The hours during which the Service is provided are 10 p.m. to 8 a.m., and the cost is 3/3 per hour but this may be reduced or cancelled having regard to the financial circumstances of the person concerned.

During 1964, sickroom help was provided for 19 patients, as compared with 22 in the previous year. The number of hours worked by the helps during the year was 1,094.

Co-operation with Hospitals

Throughout the year, the Almoners of the local Hospitals continued to refer the names of patients to the Health Department where the services of a district nurse or home help seemed to be required. 268 patients were dealt with in this manner and the necessary help was arranged as compared with 214 patients in the previous year.

The members of the Health Visiting staff attended certain hospital clinics and these arrangements have formed an invaluable link between the hospital service and the home visiting which is done by the Health Visitors. The hospital clinics concerned are as follow:—

- Post-natal clinic held at Christiana Hartley Maternity Hospital.
- Geriatric clinic held at the Promenade Hospital.
- Paediatric clinic held at the Southport Infirmary.
- V.D. clinic held at the Southport Infirmary.
- Tuberculosis (Patients) clinic held at the Southport Infirmary.

The Medical Officer of Health continued to be in consultant charge of the infectious disease beds at the New Hall Hospital; the Deputy Medical Officer of Health and one of the two Assistant Medical Officers helped with the fever hospital work.

By arrangement with the Liverpool Regional Hospital Board, the Senior Hospital Medical Officer at the New Hall Hospital continued to give three-elevenths of his time to preventive medical work in connection with tuberculosis.

The Medical Officer of Health and the Deputy Medical Officer of Health are members of the Medical Advisory Board to the local Hospital Management Committee and the Medical Officer of Health also acts as Assistant Honorary Secretary to the Medical Advisory Board.

Convalescent Home Care

This service is only provided on the recommendation of the patient's general practitioner and it is not intended for those patients who can be provided with convalescent care under the Hospital Authority's arrangements.

During the year, 8 Women and 1 man were sent to convalescent homes, the details being as follow:—

Disability	No. of Weeks
Post operative debility	3
Bronchitis	2
Depressional illness	2
Tuberculous disease of the right hip joint	2
Hypertension	2
Injury to back following fall	2
Bronchitis	2
General debility	2
Chest infection	2

Marriage Guidance

During the year the Health Committee agreed to renew the annual Grant to the Merseyside Marriage Guidance Council on which the Southport Corporation is represented by one of the lady members of the Health Committee.

HOME HELP SERVICE

The Home Help Service is designed to help those in urgent need of assistance in the home, such as expectant and nursing mothers who are unable to call on relatives to help; elderly persons who can no longer carry out all the work required; and homes where illness has so upset the normal routine that help is required.

The duties consist of keeping the house clean; sometimes doing the necessary cooking and shopping; and if there are young children, attending to their needs. It must be understood however, that the work done is that which is absolutely necessary to keep the home going during a difficult period, and therefore the help is only temporary.

The Home Helps take a great interest in their old people and do many personal things for them such as visiting them if in hospital; taking them out in bath chairs if the weather is good; doing their washing and mending, and even taking a cooked meal in to them during the weekends. All these duties are entirely voluntary and are done out of working hours. The hours worked are as follow:—

Monday to } 9 a.m. to 12 a.m. Saturday 9 a.m. to 12 a.m.
Friday } 2 p.m. to 5 p.m.

The cost of the Service is 4s. 6d. per hour but this charge may be reduced or cancelled, where there is financial hardship.

No. of persons helped during 1964:—

Home help to Households for persons							
aged 65 or over on first visit in 1964	aged under 65 on first visit in 1964					Total (6)	Total hours worked by helps during the year (7)
	Chronic sick and tuberculous (2)	Mentally disordered (3)	Maternity (4)	Others (5)			
Number of cases	643	44	7	48	86	828	88,522

No. of Staff. employed at end of year	Whole time	Part time		Total Whole time equivalent
		No.	Whole time equivalent	
Home Help Organiser	—	1	.66	.66
Home Helps	4	74	40	44
No. of visits to homes by Organiser during the year				1,851
No. of persons interviewed at office during the year				1,028

MENTAL HEALTH SERVICE

Report on the work done during 1964.

The Mental Health Section Staff have to deal with some of the most difficult problems in medical work. In no section is the need for first class co-operation between hospital consultant, family doctor and local health authority staff, more essential. From the administrative point of view the difficulties are great: Southport has no psychiatric hospital accommodation within the town so that patients and staff have often to travel considerable distances to Ormskirk, Winwick, Rainhill and Deva hospitals, as well as sometimes even further afield. This absorbs much of the time of the Mental Welfare Officers, rather unprofitably from some aspects. A 24 hour 'on call' service is required and this is not easy to maintain with a total staff of three Mental Welfare Officers. It will be seen from the statistics that 795 patients were referred to the Health Department for investigation for mental trouble during the year and of these 386 had to be admitted to

hospital for treatment. It seems likely that at least one additional mental welfare officer will be required in the future if the 'After Care' services are to develop in the way indicated in the 1959 Mental Health Act. Dr. Howie's 'After Care' Clinic has continued to do very good work during the year, and help has also been given to the patients attending by the supportive occupational therapy and social club facilities which are provided.

At the Training Centre work has gone on as last year: the numbers attending have remained fairly constant. During the year we have, however, been planning the Homes for children and adults which we hope will be completed in 1965. When these are open there will no longer be the need to send into hospital children who do not require any treatment but care such as can be given in a normal home. It is hoped that the children will continue to attend the training centre as they do at the present time.

The Homes should be a useful addition to the available facilities for Southport's mentally handicapped children and adults.

The plans for the 30 place Home for Elderly Infirm patients have been approved and it is anticipated that a start will be made on the building in the summer of 1965.

MENTAL HEALTH SERVICE

Mental Illness

Number of patients dealt with during 1964:

	Males	Females	Total
Patients:			
No. of admissions to hospital (Mental Health Act, 1959):			
— as informal patients (Sec. 5)	47	91	138
— for observation (Sec. 25)	65	113	178
— for treatment (Sec. 26)	4	21	25
— emergency application (Sec. 29)	13	31	44
— by court order (Sec. 60)	1	—	1
Total no. of admissions	130	256	386
No. of patients already in hospital under compulsory detention accepted as informal patients	37	68	105
No. of patients transferred from the Ormskirk & District General Hospital to other hospitals	7	30	37
No. of day patients taken to Ormskirk & District General Hospital (499 visits)	3	21	24
No. of patients referred to Health Department re acute mental illness...	195	389	584
After-Care Clinic:			
No. of Consultant Psychiatrist's After-Care Clinics at 44 Houghton Street	—	—	46
No. of patients seen at After-Care Clinics	34	315	349
Work Done by Mental Welfare Officers:			
No. of home visits re acute mental illness	481	924	1405
No. of domiciliary after-care visits	479	618	1097
No. of visits to patients in hospital	140	276	416
No. of patients interviewed at the Office	232	382	614
No. of visits to the Psychiatric Clinic at the Southport Infirmary	—	—	65

MENTAL HEALTH SERVICE

Mental Illness

Occupational Therapy Work done during year 1964.

No. of patients					
No. on register at beginning of the year ...	...	...	...	...	49
No. added during the year ...	...	...	...	...	68
					117
No. deducted during the year ...	...	...	...	...	65
					52
No. on register at end of the year ...	...	...	...	...	958
Sessions					
Consultant Psychiatrist's After-Care Clinic—44					
Hoghton Street ...	...	...	...	...	27
Psychiatric Social Club—Hampton Road Centre ...					52
Craftwork—Lincoln House Centre ...	...	...	...	...	51
Craftwork—Poulton Road Centre ...	...	...	...	...	47
Total No. of Sessions attended by Staff ...	...	...	...	...	177
No. of attendances made by patients					
Psychiatric Social Club—Hampton Road Centre ...					827
Craftwork—Lincoln House Centre ...	...	...	...	...	186
Craftwork—Poulton Road Centre ...	...	...	...	...	224
Total No. of Attendances ...	...	...	...	...	1,237

Mental Subnormality

Cases dealt with in 1964:

Number of cases notified to the Department:— from the Local Education Authority under Sec. 57 Education Act, 1944 (amended) ...	7
from other sources	8
Total ...	15
Number of cases admitted to hospital:— for permanent care	7
for short term care	12
Total ...	19
Number of cases placed under Guardianship ...	None
<i>Work done by Mental Welfare Officers</i>	
Number of patients seen at the Office	228
Number of domiciliary visits	300
Number of visits to the Training and Industrial Centre	88
Number of journeys made in connection with the work scheme at the Industrial Centre	262

Occupational Therapy

During the year 571 home visits were made to 13 mentally subnormal persons.

Training and Industrial Centre—Report for year 1964.

Number of cases on Register at beginning of year	44
Number of cases added to Register during year	12
Number of cases taken off Register during year	56
	7
Number of cases on Register at end of year	49
Number of sessions held during year	223
Number of attendances at Centre during year	8333
Average attendance per session	37.37

MENTAL HEALTH SERVICE

Number of patients referred to Local Health Authority during 1964

Referred by	Mentally Ill				Psychopath				Subnormal				Severely Subnormal				Total subnormal and severely subnormal		Grand Total	
	Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16			
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
General Practitioners	—	2	88	230	—	—	8	3	—	—	2	2	1	1	2	2	2	2	340	
Hospitals, on discharge from in-patient treatment	—	—	63	164	—	—	—	—	—	—	1	—	—	—	—	—	—	—	228	
Hospitals, after or during out-patient or day treatment	—	—	27	58	—	—	—	—	—	—	—	—	—	—	—	—	—	—	85	
Local education authorities	—	—	—	—	—	—	—	—	—	—	—	—	5	2	—	—	7	—	7	
Police and courts	—	—	15	20	—	—	—	—	—	—	—	—	4	1	—	—	1	—	41	
Other sources	—	—	32	55	—	—	—	—	—	—	—	—	—	4	2	1	—	3	4	94
Total	—	2	225	527	—	—	8	3	—	—	7	7	8	4	2	2	12	18	795	

MENTAL HEALTH SERVICE
Summary of Patients under Local Health Authority Care at 31st December, 1964

MENTAL HEALTH SERVICE

Admissions to Guardianship of Local Health Authority or other Guardian during 1964

Guardian	Mentally Ill		Psychopath		Subnormal		Severely Subnormal		Total subnormal and severely subnormal		Grand Total	
	Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16			
	M	F	M	F	M	F	M	F	M	F		
Admissions to guardianship during the year	—	—	—	—	—	—	—	—	—	—	—	
L.H.A.	—	—	—	—	—	—	—	—	—	—	—	
Other	—	—	—	—	—	—	—	—	—	—	—	
Total number under guardianship at end of year	—	—	—	—	—	—	—	—	—	—	—	
L.H.A.	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	

Number of patients awaiting entry to hospital, or admitted for temporary residential care at 31st December, 1964

In urgent need of hospital care	Mentally Ill		Psychopathic		Subnormal		Severely Subnormal		Total subnormal and severely subnormal		Grand Total	
	Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16			
	M	F	M	F	M	F	M	F	M	F		
In urgent need of hospital care	—	—	—	—	—	—	—	—	—	—	—	
Not in urgent need of hospital care	—	—	—	—	—	—	—	—	3	2	5	
Total	—	—	—	—	—	—	—	—	3	2	5	
Number of admissions for temporary residential care (e.g., to relieve the family), To N.H.S. hospitals	—	—	—	—	—	—	4	3	1	2	13	
To L.A. residential accommodation	—	—	—	—	—	—	—	—	—	—	—	
Elsewhere	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	4	3	1	2	13	

MENTAL HEALTH SERVICE

Premises provided at 31st December, 1964

Age group provided for	Mental Category provided for	Day training Centres		Residential training Centres		Social Clubs or Centres		Homes or Hostels	
		Number of centres	Number of places Juniors	Number of centres	Number of places	Number of clubs or centres	Number of places	Number of homes or hostels	Number of places
Under 16	Mentally ill	—	—	—	—	—	—	—	—
	Mentally subnormal	—	—	—	—	—	—	—	—
16 and over	Mentally ill	—	—	—	—	1	60	—	—
	Mentally subnormal	—	—	—	—	—	—	—	—
Juniors and Adults	Mentally ill	—	—	—	—	—	—	—	—
	Mentally subnormal	1	40	35	—	—	—	—	—
	Total	1	40	35	—	—	1	60	—

Special units included above providing for the severely subnormal with gross physical handicaps or gross behaviour difficulties.	(a) Number of Units within Day Training Centres	1	Self contained units independent of Day Training Centres	(a) Number of Units —
	(b) Number of places	8	(b) Number of places	(b) Number of places —

Section III

CONTROL OF INFECTIOUS DISEASE

TUBERCULOSIS

New Cases and Mortality

The number of new cases of tuberculosis which came to the notice of the Department during the year was 24; of these 22 were found to be suffering from pulmonary disease, and 2 from non-pulmonary disease. The following table shows the age and sex of these patients together with similar information regarding the number of persons who died of tuberculosis during the year.

AGE PERIODS (in years)	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	...	—	—	—	—	—	—	—
1 to 5	...	—	—	—	—	—	—	—
5 to 15	...	—	1	—	—	—	—	—
15 to 25	...	1	2	2	—	—	—	—
25 to 45	...	3	3	—	—	1	—	—
45 to 65	...	7	4	—	—	3	2	1
65 to 75	...	—	1	—	—	—	1	—
75 and over	—	—	—	—	—	—	—	—
TOTALS	...	11	11	2	—	4	3	1

Treatment Clinic

The 24 new cases came to the notice of the Department in the following ways:—

By primary notifications	...	...	...	...	...	...	...	...	12
By transfers from other areas	...	...	...	...	...	...	...	...	12
									—
									24

All the cases for which primary notifications were received and all patients transferred from other areas were seen at the Treatment Clinic which is held at the Southport Infirmary. The total number of cases on the Clinic Register at the end of 1964 was 222, and 17 of these patients were found to have sputum containing tubercle bacilli. During the year, 52 Treatment Clinics were held and 394 visits were made by patients; the total number of X-ray examinations of patients was 344.

It should be mentioned that the Southport and District Hospital Management Committee is responsible for the organisation and administration of the Tuberculosis Treatment Clinics.

No. of New cases and Deaths for Period 1955 to 1964:

YEAR	NEW CASES		DEATHS	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
1955	...	65	10	13
1956	...	61	—	—
1957	...	46	3	9
1958	...	62	6	6
1959	...	40	4	7
1960	...	33	—	4
1961	...	31	1	4
1962	...	42	4	4
1963	...	31	1	10
1964	...	22	2	7

Contact Clinic

The Local Health Authority is responsible for the Contact Clinic and this is also held at the Southport Infirmary by arrangement with the Hospital Management Committee.

During the year 42 clinics were held and 535 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 489. None of the contacts was found to be suffering from pulmonary tuberculosis in 1964.

Domiciliary Visiting

A Health Visitor is employed by the Local Health Authority for the purpose of visiting cases in their own homes to give help and advice to patients and their families.

The following are the number of home visits made by this Health Visitor during the year:—

To tuberculous patients	...	...	...	...	...	...	1043
To contacts of tuberculous patients	...	...	...	...	...	...	607
To other chest patients	...	...	...	...	...	...	8
							—
							1658
							—

In addition, the Health Visitor also attends at the Tuberculosis Treatment and Contact Clinics and this arrangement is very satisfactory as it provides a useful link between the Hospital Service and the Local Health Authority Service.

During 1964, the Health Visitor made 93 attendances at the Tuberculosis Treatment and Contact Clinics, and 3 attendances at B.C.G. Clinics.

Housing

The Points Scheme which is used for the purpose of selecting tenants for Corporation houses, makes special provision for tuberculous patients. Additional points are awarded when either the applicant or his wife, or any of their children, are known to be suffering from infectious tuberculosis. This concession is of benefit to those cases where improved housing accommodation is essential for the patient and his or her family.

Voluntary Tuberculosis Care Committee

The Southport Voluntary Tuberculosis Care Committee continued as in previous years to provide patients and their families with financial and other assistance. The Committee forms an essential part of the general scheme for tuberculous patients and all the medical and nursing staff who are engaged in this service are members of the organisation. The Tuberculosis Health Visitor in the Health Department acts as Hon. Case Secretary and the Chief Clerk undertakes the duties of Hon. Secretary and Treasurer. Assistance is also received from other members of the staff of the Health Department in organising the Christmas Seal Sale.

During 1964 the Care Committee provided considerable financial and other assistance to patients and their families.

Mass Miniature Radiography Units

This Unit visited Southport in January and the following persons attended at the various sessions which were arranged:—

			Male	Female	Total
Health Department Staff	...	...	29	43	72
Promenade Hospital Staff	...	...	71	192	263
Southport Infirmary Staff	...	...	36	144	180
Cambridge Hall, Open Sessions	...	...	448	623	1071
Factory Group	...	...	30	97	127
Totals ...		...	614	1099	1713

The findings were as follow:—

Public Session 1 Female — active pulmonary tuberculosis.

Cambridge Hall 2 Males } pulmonary tuberculosis requiring occasional out-
1 Female } patient supervision only.
1 Male } malignant neoplasm
1 Female }

TUBERCULOSIS

No. of patients dealt with at the Treatment Clinic during the years 1960 to 1964 inclusive

	1960			1961			1962			1963			1964		
	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total
1. No. of patients on register at beginning of year	312	23	335	272	15	287	258	15	273	249	13	262	232	13	245
2. No. of patients added during the year:															
(a) primary notifications of new cases	16	—	16	17	1	18	27	3	30	23	1	24	10	2	12
(b) transfers from other areas	15	—	15	11	—	11	14	1	15	8	—	8	12	—	—
(c) lost sight of cases returned	1	—	1	2	—	2	1	—	1	—	—	—	—	—	—
TOTALS (1)	344	23	367	302	16	318	300	19	319	280	14	294	254	15	269
3. No. of patients deleted during the year:															
(a) died (from Tuberculosis)...	3	—	3	4	—	4	3	—	3	6	—	5	—	1	5
(b) transferred to other areas...	10	1	11	12	—	12	10	—	10	16	—	8	—	1	9
(c) recovered ...	42	5	47	18	—	18	23	5	28	7	—	7	24	1	25
(d) lost sight of or refused further assistance ...	6	2	8	5	1	6	7	1	8	10	—	10	1	—	1
(e) tuberculosis not primary cause of death ...	11	—	11	5	—	5	8	—	8	9	1	10	7	—	7
TOTALS (2)	72	8	80	44	1	45	51	6	57	48	1	49	45	2	47
4. No. of patients on register at the end of year (i.e., totals (1), less totals (2)) ...	272	15	287	258	15	273	249	13	262	232	13	245	209	13	222
5. Summary of new patients found during the year:															
(a) Primary notifications of new cases	16	—	16	17	1	18	27	3	30	23	1	24	10	2	12
(b) Transfers from other areas	15	—	15	11	—	11	14	1	15	8	—	8	12	—	—
(c) Patients found from death returns (figures not included in items (1) to (4) above) ...	1	—	1	1	2	—	1	2	—	1	—	—	—	—	—
(d) Lost sight of cases returned	1	—	1	1	2	—	1	2	—	1	—	—	—	—	—
TOTAL NUMBER OF NEW PATIENTS ...	33	—	33	31	1	32	42	4	46	31	1	32	22	2	24

VENEREAL DISEASES

At the end of the year, 163 new cases were under treatment at the clinic, as compared with 123 cases at the end of 1963. During 1964, 132 non-venereal cases made 597 attendances.

An important feature of the prevention and treatment of venereal disease is the work which is done to ensure that patients attend for treatment at regular periods. So far as the female patients are concerned, this follow-up work is done by one of the Health Visitors; this Health Visitor is also present at the V.D. Clinic when patients are being seen by the Consultant Physician, and the arrangement is of great value in maintaining a close liaison between the district and clinic work.

As there is no suitable person on the staff of the Health Department to deal with the follow-up of male patients, an arrangement has been made with the Southport and District Hospital Management Committee for the male nurse at the V.D. Clinic to undertake these duties during his off-duty time on a repayment basis, and due to his efforts the number of male defaulters has been reduced to a minimum.

No. of new patients during 1964:

				Male	Female	Total
Syphilis	...	...	...	2	2	4
Gonorrhoea	...	...	...	21	6	27
Non-Venereal Infections	...	...	...	86	46	132
TOTALS	...	...		109	54	163

No. of patients and attendances for period 1955 to 1964:

YEAR	SYPHILIS					GONORRHOEA		
	Number of new cases during the year			Number of cases on register at end of year	Total number of attendances during year	Number of new cases during the year	Number of cases on register at end of year	Total No. of attendances during year
	Congenital	Others	Total					
1955	1	7	8	56	625	4	5	46
1956	3	7	10	49	1336	6	4	85
1957	—	7	7	55	1152	10	3	78
1958	—	5	5	48	1151	8	5	43
1959	—	1	1	45	657	10	4	73
1960	2	6	8	47	769	14	5	92
1961	1	9	10	46	867	15	3	83
1962	—	5	5	47	922	15	6	71
1963	—	4	4	50	1105	16	8	117
1964	1	3	4	45	611	27	7	143

There is little evidence in Southport of any increase in the incidence of these diseases commensurate with that which has occurred in some parts of the country. A special effort was made during the year to improve the information available to the general public about the local facilities for treatment and advice and this will be continued.

INFECTIOUS DISEASES

Classification of Cases notified during the year 1964

NOTIFIABLE DISEASE	NUMBER OF CASES NOTIFIED AGES IN YEARS							
	At All Ages	Un- der 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 Up- wards
Chickenpox	956	21	293	598	19	21	4	—
Dysentery	2	1	—	1	—	—	—	—
Erysipelas	4	—	—	—	—	1	2	1
Food Poisoning	2	—	—	—	—	2	—	—
German Measles	154	9	63	69	9	4	—	—
Measles	980	30	599	338	11	2	—	—
Meningococcal Infection	1	—	1	—	—	—	—	—
Pneumonia	10	—	3	3	—	—	2	2
Poliomyelitis	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—
Scarlet Fever	23	—	11	12	—	—	—	—
Whooping Cough	35	2	21	12	—	—	—	—
Encephalitis	2	—	—	2	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—
TOTALS	2169	63	991	1035	39	30	8	3

INFECTIOUS DISEASES

Number of Notified Cases and number of Deaths for the years 1955 to 1964 inclusive

NOTIFIABLE DISEASE	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED										DEATHS FROM INFECTIOUS DISEASE						Total Deaths during 10 years 1955 to 1964
	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1963	1962	1961	1960	1959	1958	
Chicken Pox	286	498	746	173	383	656	445	697	333	956	5173	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	35	134	—	13	5	37	26	69	4	2	325	—	—	—	—	—	—
Encephalitis	—	—	—	—	—	—	1	1	—	2	4	—	—	—	—	—	—
Erysipelas	9	12	6	6	5	12	7	6	2	4	69	—	—	—	—	—	—
Food Poisoning	16	5	—	26	3	4	3	3	28	2	90	—	—	—	—	—	—
German Measles	57	110	169	86	70	91	231	2369	73	154	3410	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	238	813	476	124	1554	348	1107	546	482	980	6668	—	—	—	—	—	—
Meningococcal Infect'n	3	3	1	—	2	1	1	1	2	1	15	—	2	—	—	—	2
Ophthalmia Neonatorum	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—
Other Forms of Tuberculosis	10	13	3	6	4	—	1	3	1	2	43	—	—	1	1	1	6
Paratyphoid Fever	1	1	—	—	—	—	—	—	1	—	3	—	—	—	—	—	—
Pneumonia	31	37	41	12	21	14	17	32	7	10	222	58	50	52	45	28	552
Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Poliomyelitis	9	6	4	3	2	—	7	—	—	—	31	1	—	1	—	—	2
Puerperal Pyrexia	—	4	1	1	1	—	—	4	—	—	12	—	—	—	—	—	—
Pulmonary Tuberculosis	65	62	46	40	33	31	27	23	10	399	13	6	9	6	7	4	10
Scarlet Fever	32	26	40	53	144	46	29	25	21	23	439	—	—	—	—	—	70
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhus	43	198	63	50	113	60	34	15	151	35	762	—	—	—	—	—	—
TOTALS	835	1922	1596	616	2347	1304	1940	3796	1132	2181	17669	72	58	62	53	37	55
																	632

Section IV

ADDITIONAL INFORMATION

ADDITIONAL INFORMATION

Blindness, Cerebral Palsy and Epilepsy

I am indebted to Mr. J. Sinnott, the Senior Welfare Officer, for the following details:

Blindness

There are 189 persons on the Blind Register and 44 others are classified as partially sighted. Many of these persons attend the Handicraft Classes and take part in other social activities at the Blind Social Centre, Gallie House, Hoghton Street, Southport.

Cerebral Palsy

There are no registered cases in the area.

Epilepsy

The following are the numbers of persons accommodated on account of epilepsy under arrangements made by the Welfare Committee:—

	Female	Male	Total
Windsor House, Southport	—	2	2
David Lewis Colony, Alderley Edge ...	1	—	1
Maghull Homes, Maghull	3	2	5
Langho Colony, Blackburn	1	1	2
Craig House, Southport	—	—	—
West Hill, Southport	2	—	2
	7	5	12

HEALTH EDUCATION

During the year demonstrations have taken place in the Infant Welfare Centres and leaflets and posters have been used for publicity purposes.

Lectures have been arranged from time to time for a variety of organisations and on a number of subjects, and a sound projector was purchased last year to assist this work.

Film shows showing the relationship between smoking and health were shown to members of a Youth Club and to students attending a Modern Secondary School and also students attending a Technical College. Posters and leaflets dealing with venereal disease were used throughout the year.

Vastly increased effort and money is being put into the field of education. Much of this is required to keep pace with the growth and application of technical knowledge in the modern world. So far, not much emphasis has been placed upon health education but the staff of the Department are aware of an increasing demand for such instruction.

Social habits change and the amount of freedom from parental supervision, the ease of travel and the increasing material wealth of our population, particularly in the younger age groups, makes the need for instruction more necessary than ever. Preventive medicine makes a less dramatic appeal than curative medicine as currently portrayed on television screens. This is a pity but much could be done to encourage people to avoid disease provided they have the requisite knowledge and the will to apply it. Nothing in the field of health education is so useful as the personal instruction given by the interested family doctor, public health medical officer or nurse when speaking to the individual or to small groups, but there is a real place for the specialist health education officer as well.

It is hoped that eventually a health education section of the Department can be established as there is much work of the kind indicated waiting to be done. One has only to look at the figures of cases of preventable disease; of young, indeed very young, unmarried mothers, and of venereal disease incidence, to understand something of the position. There is provision in the Ten Year Plan for a Health Education Section in the Department but, on financial grounds, no firm date as to the appointment of a Health Education Officer and his staff has yet been agreed.

Nurseries and Child Minders Regulation Act, 1948

Private Nursery

One private nursery registered by the Council under this Act was functioning at the end of the year, and consists of the playroom, dining room, cot room and cloakroom of a private house for a maximum number of fifteen children.

Nursing Homes

At the end of the year there were 16 Nursing Homes registered with the Local Authority, with 5 maternity beds and 188 others.

Only Nursing Homes registered by the Local Authority under Section 187 of the Public Health Act, 1936, are permitted to admit patients requiring nursing and medical attention.

The number of inspections made to nursing homes during the year was 43.

Nurses' Agencies

Any person who wishes to carry on an Agency for the supply of nurses must be licensed in accordance with the requirements of the Nurses Act of 1943, and the Nurses Agencies Regulations of 1945. One additional agency was licensed during 1964, and reports showed that this and one existing establishment were being conducted in a satisfactory manner.

Persons in need of Care and Attention

No cases were dealt with during 1964 under the powers contained in Section 47 of the National Assistance Act, 1948.

Centres and Clinics

The following list shows the Centres and Clinics which were in operation at the end of the year:

ADDRESS	DAY	TIME
CHILD WELFARE CENTRES:—		
Methodist Church, Ainsdale	Mondays	2 to 4 p.m.
North Road, Crossens	Wednesdays	2 to 4 p.m.
Lincoln House Birkdale	Tuesdays and Thursdays	2 to 4 p.m.
Poulton Road, High Park	Tuesdays	2 to 4 p.m.
do. do.	Wednesdays	2 to 4 p.m.
Hampton Road	Tuesdays	2 to 4 p.m.
do.	Thursdays	2 to 4 p.m.
Methodist School, Derby Road	Fridays	2 to 4 p.m.
Marshside Road	Thursdays	2 to 4 p.m.
ANTE-NATAL CLINICS:—		
44 Hoghton Street	Fridays	9.30 a.m.
POST-NATAL CLINICS:		
Christiana Hartley Maternity Hospital ...	Tuesdays	9.30 a.m.
TUBERCULOSIS CONTACT CLINIC:—		
Southport Infirmary	Mondays	2 to 5 p.m.
	Mondays	9.0 a.m. to 12.30 p.m.
	Tuesdays	2.0 to 4.30 p.m.
CHIROPODY CLINICS:—		
44 Hoghton Street...	Wednesdays	9 a.m. to 12 noon and 1.0 to 4.0 p.m.
2 Church Street	Thursdays	9 a.m. to 12 noon

Medical Examinations

The following table shows the work done by the medical staff of the department during 1964 in regard to the medical examination of employees for the purpose of the Superannuation and Sickness Pay Schemes.

Department	NUMBER OF MEDICAL EXAMINATIONS			
	Super- annuation Scheme	Sickness Pay Scheme	Re- Examina- tions	Total
CORPORATION DEPARTMENTS:—				
Borough Architect	9	—	—	9
Borough Engineer	2	37	5	44
Borough Treasurer	13	—	—	13
Children's	4	—	—	4
Education	61	25	4	90
Estates and Baths	—	3	—	3
Fire Service	3	—	—	3
Flower Show	—	—	—	—
Health	17	38	2	57
Libraries	3	3	—	6
Lighting	1	—	—	1
Police	3	—	—	3
Publicity	3	9	—	12
Parks and Cemeteries	1	11	—	12
Town Clerk's	11	3	1	15
Transport	2	42	—	44
Water Board	3	13	—	16
Weights and Measures	2	—	—	2
Welfare Services	1	16	—	17
OTHER DEPARTMENTS:—				
Electricity	6	—	—	6
District Nursing Association	5	—	—	5
TOTALS	150	200	12	362

In addition, 56 examinations prior to entry to a Teacher's Training College, were made in 1964.

Crematorium

The Southport Crematorium was opened in September 1959. The Medical Officer of Health continued to act as Medical Referee and the Deputy Medical Officer of Health and one of the Assistant Medical Officers of Health each carried out the duties of Deputy Medical Referee.

The number of certificates required in 1964 was 841.

Work done on behalf of the Children's Committee

During the year, 134 examinations were carried out on behalf of the Children's Committee, the details being as follow:

Examination of children who are boarded-out in foster homes	...	...	126
Admissions to Links Avenue Children's Home	...	...	7
Discharges from Links Avenue Children's Home	...	...	1

Dr. Davison, the Deputy Medical Officer of Health continued to be responsible for the medical care of the children in the Home administered by the Children's Committee.

CIVIL DEFENCE

AMBULANCE AND FIRST AID SECTION

Recruiting position for year 1964:

Quarter	Volunteers			Recruits	
	Men	Women	Total	Men	Women
March, 1964 ...	15	29	44	—	—
June, 1964 ...	15	27	42	—	—
September, 1964 ...	14	28	39	—	—
December, 1964 ...	17	27	44	3	2

Training as at 31st December, 1964:

	Men	Women	Total
Passed Standard Test. Entered Class A. ...	6	16	22
Passed Standard Test. Entered Class B ...	—	—	—
Completed training—awaiting test ...	2	4	6
Undergoing Standard training... ...	—	—	—
Passed Home Nursing Test	4	12	16

Section V

ENVIRONMENTAL HYGIENE

SANITARY CIRCUMSTANCES OF THE AREA

Geology—The area consists of a bed of blown sand resting on peat, below which lies a bed of laminated blue clay. While the lower strata appears to be undergoing an exceedingly slow subsidence, any loss which might result from that circumstance is much more than made good by the continual accretion of sand derived from the Mersey. Land is gradually being reclaimed, both by natural and artificial means. The overlying sand on the east and south borders gradually thins out, exposing a margin of peat within the boundary of the area.

The elevation of the built-upon area varies from about 12 feet to 38 feet above Ordnance Datum.

Water—The water supply is provided by the West Lancashire Water Board which is responsible also for the supply to several neighbouring local authorities.

All the water supplied is pumped from wells and boreholes sunk in the sandstone rocks to depths varying between 180 and 1,000 feet.

The five pumping stations which contribute to the supply of Southport are situated five to ten miles south-east of the town.

Owing to the depth of the wells and the control exercised over their surroundings, the water, though hard, is consistently of the highest standard of bacterial purity. As a precaution, however, all water is chlorinated at the source.

At four pumping stations filters are installed to remove the iron and manganese present in the water as it comes from the wells. After filtration and chlorination the water is stored in covered reservoirs.

Samples are taken for chemical and bacteriological examination at regular intervals.

Town's Water Chemical Analysis, 2nd September, 1964

	Parts per Million								
Total solid matter in solution	404
Oxygen absorbed } in 15 minutes	0.16
from Permanganate } in 3 hours	0.32
Ammonia	Nil
Albuminoid Ammonia	0.015
Nitrogen as Nitrates	0.07
Nitrogen as Nitrites	Nil
Combined Chlorine	33
Free Chlorine	Nil
Lead	Nil
Copper	Nil
Zinc	Nil
Total Iron	Nil
Carbonate Hardness (as Calcium Carbonate)	203
Total Hardness (as Calcium Carbonate)	290
Calcium (as Ca)	68
Magnesium (as Mg)	29

(p.H. value: 7.3)

Town's Water, Bacteriological Examination, 15th May, 1964

Number of Bacteria per ml. at 37°C. ....	...	...	...	...	...	...	Nil
Faecal Coli per 100 ml. in water examined	...	...	...	...	...	...	Nil
Total coliform organisms per 100 ml. in water examined	...	...	...	...	...	...	Nil

This and other tests indicate that the water falls into classification 'one' which is highly satisfactory. 'Fluoride' is present in quantities of approximately 0.1 parts per million.

Water supply to houses:—

Particulars	Number of houses	Population
Mains supply, provided by the West Lancs. Water Board	26850	80080*
Water supply from sources other than specified above	2	4
TOTALS	26852	80084

* Registrar-General's estimate for mid-year 1964.

Public Baths—The Victoria Baths near the pier have ample bathing accommodation which, in addition to three sea-water swimming baths, comprise 40 slipper baths, "Pine Bubble Baths", and a suite of Turkish and Russian Baths. The number of attendances during the twelve months ending 31st December, 1964, was 311,201.

The large Open-Air Bathing Lake in Princes Park is available for mixed bathing, and has a water surface of over 55,000 square feet. The Bathing Lake was visited by 179,297 persons during the year, of whom approximately two-thirds were bathers. The sea water with which the Lake is filled is first stored in settlement tanks so that any suspended matter is deposited. It is then filtered through fine gravel and sand and finally is carefully chlorinated. Before reaching the lake the water is aerated. This process goes on continuously so that all the water in the lake passes through the filters and chlorinating apparatus once in every 6-8 hours. A proportion of fresh sea water is added daily after filtration and chlorination.

The bathing water at the Victoria Baths is purified in the same manner as that employed at the Sea Bathing Lake, but the turn-over period in each bath is approximately three hours.

Both chemical and bacteriological tests are made on the water of the swimming baths. The chemical analysis consists of the estimation of the pH Value, nitrites, free ammonia and chlorine content which consists of free residual chlorine and chloramines. The sample should comply in all respects with the Ministry of Health recommendations.

Bacteriological examination involves the estimation of the number of coliform bacilli in 100 millilitres of the water and also the number of Bact. coli (type 1) in a similar volume. No organisms of either type should be present. A Plate Count is also determined. No Plate Count should show more than 100 colonies per millilitre.

Eleven chemical estimations of the chlorine content of the water from the Sea Bathing Lake were made of which nine were unsatisfactory, but all eleven samples submitted for bacteriological examination were found to be satisfactory.

At the Victoria Baths all four samples of water submitted for chemical examination proved satisfactory as did the four samples examined bacteriologically.

**Satisfactory Chemical Sample of Bathing Water
Taken at the Victoria Baths on 3rd November, 1964**

Appearance	...	...	...	...	...	Clear and bright. Colourless. Minute trace of flocculent matter.
pH Value	...	...	...	...	...	7.3
Nitrite	...	...	...	...	...	Nil
Free Ammonia. Parts per million						Trace
Free Residual Chlorine (Free chlorine plus Chloramines) Parts per million	...	...	...	...	0.75	

Result—Satisfactory

**Satisfactory Chemical Sample of Bathing Water
Taken at the Sea Bathing Lake on 28th July, 1964**

Appearance	...	...	...	...	...	Clear and bright. Colourless. Minute trace of flocculent matter.
pH Value	...	...	...	...	...	7.4
Nitrite	...	...	...	...	...	Nil
Free Ammonia, Parts per million						Nil
Free Residual Chlorine (Free chlorine plus chloramines) Parts per million	...	...	...	...	0.41	

Result—Satisfactory

**Report on Bacteriological Examination of Bathing Water
at the Sea Bathing Lake on 30th July, 1964**

Location of Sample	Probable numbers per 100 ml.		PLATE COUNT Organisms per ml.
	Coliform bacilli	Bact. coli (type 1)	
Centre of the Lake	...	0	3 Satisfactory

**Report on Bacteriological Examination of Bathing Water
at Victoria Baths taken on 30th July, 1964**

Location of Sample	Probable numbers per 100 ml.		PLATE COUNT Organisms per ml.
	Coliform bacilli	Bact. coli (type 1)	
Premier Plunge	...	0	5 Satisfactory

PUBLIC BATHS—ATTENDANCES 1962-1963-1964

Year	NUMBER OF PERSONS ATTENDING			
	INDOOR			OPEN AIR
	Victoria Baths (Opened 1836) (Remodelled 1926)	Canning Road Baths (Opened 1903)	Compton Road Baths (Opened 1926)	
1962	260525	4396	4165	143999
1963	278676	4357	3869	201439
1964	311201	4196	3647	179297

PUBLIC CONVENIENCES

Efforts continued to improve still further the standard of public conveniences in the Borough and towards the end of the year, these culminated in the forming of a special committee to go into the question of the standards at which we should aim.

It is hoped that this will result in significant improvement in 1965.

SANITARY INSPECTION OF THE AREA

Land Charge Enquiries—Information has been supplied during the year on 2,600 enquiries in respect of properties and sites in the Borough.

Sewage Disposal—The Sewage Works at Bank End, Crossens, deals with over two-thirds of the sewage passing into the system, and although the plant is not of modern design, no serious complaints have been received regarding its efficiency.

The system of de-odourising the air when the wind direction is from the sea appears to act satisfactorily.

The new works at Ainsdale have materially helped in the development of the district and an average daily flow of 250,000 gallons is now dealt with.

The effluent from the Bank End Works is discharged into the sea and it is worthy of note that Southport's beach has been described in the National Press as one of the very few "clean" ones.

The sludge from both works is disposed of by either drying or lagooning.

The Borough Engineer is responsible for the operation of both these works.

Drainage—Complaints of blocked drains totalled 2,474 and of these 1,834 were cleared, free of charge, by workmen employed by the Department; 518 cases of defective drains were dealt with under the supervision of the Public Health Inspectors, the work being undertaken by the Borough Engineer's Department.

DRAIN STOPPAGES—YEAR 1964

Number Reported	Number Not Confirmed	Number Cleared No Charge	Number Cleared On Orders
2,474	122	1,834	518

Improvements in Sanitation—During the year the task of abolishing Bristol Closets in the Borough has continued, and the position is rapidly approaching when there will not be a house in Southport where the only closet is one of this type: in 243 cases, statutory notices had to be served requiring owners to carry out the conversions.

Household Refuse—The work of collection and disposal of refuse is the responsibility of the Borough Engineer.

Pest Control—In addition to the destruction of rats and mice, the advice of the Health Department's technical staff is sought on many other occasions where pests such as cockroaches, crickets, flies, bugs, wasps and other insects are involved. Information has been given and in many cases the work of exterminating these pests has been undertaken for the complainants.

Pet Animals—No contraventions of the Pet Animals Act were observed.

Schools—The regular inspection of sanitary arrangements at the schools has continued, and the standard of cleanliness has been well maintained. It is hoped to secure an improvement in the type of sanitary accommodation at some of the Church Schools.

Hostel—There is one common lodging house in the Borough which provides frugal accommodation for men (while the accommodation is in no way pretentious it is clean).

Caravans—The Caravan Sites and Control of Development Act, 1960, came into force on the 29th August, 1960.

Number of licensed sites for caravans	...	...	...	...	4
Total number of caravans permitted	...	...	...	...	113
One of these sites is in use, and this site is well maintained.					

PUBLIC MORTUARY

The mortuary facilities in the town at Duke Street Cemetery, though improved in 1956, cannot be regarded as of the type and standard required in a modern County Borough. The buildings are old and have the disadvantage that the post-mortem room is separated by some distance from the mortuary so that it has proved to be difficult to adequately screen the premises. The provision of a modern mortuary has been discussed but no decision has yet been made.

One hundred and seventy-eight post-mortems were carried out during the year.

FACTORIES

Sections 1 to 7 of the 1961 Factories Act are administered by local authorities in all factories where mechanical power is not used, and Section 7 is administered by them in all factories.

Working conditions such as cleanliness, overcrowding, temperature, ventilation and drainage of floors are dealt with under these sections of the Act and sanitary conveniences are referred to specifically in Section 7 of the Act.

PREMISES	Number on Register	Number of inspections (1) Written intimation (2)	
		1	2
Factories (other than domestic factories) where motive power is not employed	18	—	—
Factories where motive power is employed ...	431	352	5
Outworkers employed in finishing of wearing apparel	35	35	—

Prevention of Damage by Pests Act, 1949

Work done during year 1964

	TYPE OF PROPERTY					AGRI-CULTURAL (5)	
	Local Authority (1)	NON-AGRICULTURAL			Total of Columns (1), (2) and (3) (4)		
		Dwelling-Houses (including Council Houses) (2)	All other (including Business Premises) (3)				
Number of properties in Local Authorities District	236	26,693	4,387	31,316	40		
Total number of properties inspected as a result of notification	84	353	111	548	26		
Number of properties found to be infested by:—							
Common Rat	Major ...	2	—	2	4	2	
	Minor ...	18	73	29	120	10	
House Mouse	Major ...	—	—	—	—	—	
	Minor ...	10	77	65	152	6	
Total number of properties inspected in the course of Survey under the Act... ...	197	643	611	1,451	40		
Number of such properties found to be infested by:							
Common Rat	Major ...	12	56	95	163	15	
	Minor ...	18	63	29	110	9	
House Mouse	Minor ...	12	77	65	154	7	
Total number of properties otherwise inspected	—	—	—	—	—	—	
None of the above properties was found to be infested in Section 4							
Total inspections carried out including re-inspections ...	245	967	878	2090	208		
Number of infested properties	72	346	285	703	49		
Number of treatments carried out	18	45	27	90	4		
Number of "Block" control schemes carried out	—	—	—	—	—		

The above table indicates that 2,090 visits were made to properties in the Borough resulting in 703 infestations being discovered. In addition, 208 inspections were made to agricultural properties and 49 infestations were found. Each of these cases was treated by the Local Authority's Rodent Officer and re-inspections were carried out. In no case did a re-infestation occur.

PUBLIC HEALTH INSPECTORS

Summary of Complaints and Visits made during year 1964:—

Nuisances

COMPLAINTS INVESTIGATED—

Choked and defective drains	...	...	...	...	...	...	2,275
Housing defects	...	...	...	...	...	...	208
Ditches and watercourses	...	...	...	...	...	...	5
Smoke emission	...	...	...	...	...	...	31
Noise	...	...	...	...	...	...	33
Other nuisances	...	...	...	...	...	...	942
Total No. of complaints							3,494

NOTICES—

Served	Preliminary, 233	Statutory, 289
Abated	Preliminary, 268	Statutory, 194

VISITS—

To Premises:

Dwellinghouses	...	...	...	...	...	...	7,248
Shops	...	...	...	...	...	...	1,580
Offices	...	...	...	...	...	...	64
Factories and workshops	...	...	...	...	...	...	352
Dairies	...	...	...	...	...	...	128
Food preparing premises	...	...	...	...	...	...	1,983
Ice Cream premises	...	...	...	...	...	...	115
Other premises	...	...	...	...	...	...	2,287
Total No. of Visits							13,757

Regarding:

Drainage	...	...	...	...	...	...	1,499
Conversion of closets	...	...	...	...	...	...	2,435
Ditches and watercourses	...	...	...	...	...	...	19
Rats, mice and other vermin	...	...	...	...	...	...	2,118
The Housing Acts	...	...	...	...	...	...	508
Rent Acts	...	...	...	...	...	...	17
Food Hygiene Regulations	...	...	...	...	...	...	2,747
Works in progress	...	...	...	...	...	...	330
Other matters	...	...	...	...	...	...	6,156

Food and Drug Samples—Year 1964

SAMPLES OBTAINED FOR BACTERIOLOGICAL EXAMINATION—

SAMPLES OBTAINED FOR CHEMICAL ANALYSIS—

Rag Flock and Other Filling Materials Act, 1951

Registration of premises where the manufacture of upholstered articles of furniture is carried on as a business is required under this Act, and yearly licences to manufacture or store rag flock are necessary. In addition records of consignments of filling materials for use in the trade are required to be kept for inspection.

These measures are to assist in ensuring that only clean filling materials are used in the business, and to prevent undesirable practices which were alleged to have taken place formerly.

Nine premises are registered under the Act, and three of these were granted licences to store Rag Flock during the year.

CLEAN AIR

There were thirty-one complaints regarding the emission of smoke. No legal proceedings were instituted and all were investigated and recommendations made.

In the field of domestic smoke, difficulty arising from the major change in policy on the part of the National Gas Council continued to be experienced and this was aggravated by the failure of the Ministries concerned to amend the law to meet the new situation.

As a result, persons building new dwelling-houses are perfectly free to instal fuel-burning appliances which would not be accepted in Smoke Control Areas. If these new houses are eventually included in Smoke Control Areas, those appliances will have to be changed, and no grant will be available to the owners or occupiers for this purpose. Houses built after 16th August, 1964, are not eligible for such grants.

The only appliances which are acceptable in Smoke Control Areas are:—

- (1) Closed/Openable space heating appliances burning hard coke;
- (2) Open fires of the under-floor-draught type burning hard coke;
- (3) Gas appliances;
- (4) Oil burning appliances; and
- (5) Electric night storage heaters:

HOUSING

General—The number of inhabited houses increased to 27,075.

The following table shows the number of houses built during the period 1955 to 1964, plus additional accommodation made available as a result of adaptations and additions to existing properties:

Year	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
Number of houses built	186	253	305	122	214	115	102	255	252	298

Rent Act—There was one application for a Certificate of Disrepair.

Overcrowding—The number of complaints regarding alleged overcrowding received during the year was 18. In the instances where overcrowding was found to occur the matter was referred to the Housing Department requesting that assistance be granted.

Demolition and Closing Orders—The task of dealing with the houses in the Borough which appeared to be unfit for human habitation continued and during 1964 18 houses were represented to the Health Committee. The formal procedure prescribed by the Housing Acts, was commenced in respect of 15 houses.

The Local Authority are in favour of as many as possible of unfit houses being saved, and it is hoped that the Improvement Grants will encourage owners of old houses to bring them up to a reasonable standard and save them from Demolition and Closing Orders.

Housing Improvements—The year marked a major step forward in this connection with the introduction of the Housing Act, 1964, Part II of which provides a completely new set of powers and duties in regard to the compulsory improvement of dwellings. The Ministry of Housing and Local Government state that "the purpose behind the provisions is to secure that within the next ten years most of the two million or so improvable older houses which lack amenities, and which still have a reasonable life, are provided with hot water, a fixed bath or shower, a wash-hand basin, an inside lavatory and a proper food store—the five standard amenities."

The machinery for achieving this is complex and cumbersome, but it is hoped that the work of establishing "Improvement Areas" will commence in 1965.

Offices and Shops—The Offices, Shops and Railway Premises Act, 1963, came into force during the year, and the work of registering and inspecting offices and shops in the Borough commenced on the 1st July. The following table, therefore, refers to the second half of the year:—

The Offices, Shops and Railway Premises Act, 1963 Registrations and General Inspections

Class of Premises	Number of Premises Registered during the Year	Total Number of Registered Premises at End of year	Number of Registered Premises Receiving a General Inspection during the year
Offices	264	259	158
Retail Shops	682	670	258
Wholesale Shops and Warehouses	43	43	5
Catering Establishments open to the public, Canteens	91	90	47
Fuel Storage Depots	5	5	—
Totals	1085	1067	468

Number of Visits of all kinds by Inspectors to Registered Premises—2,030

Analysis of Persons employed in Registered premises by workplace.

Class of workplace	Number of persons employed
Offices ...	2,027
Retail Shops ...	3,408
Wholesale departments and Warehouses ...	378
Catering establishments open to the public ...	1,315
Canteens ...	30
Fuel storage depots ...	28
Totals ...	7,186
Males ...	2,664
Females...	4,522

On the whole, the new Act was well received by occupiers of offices and shops, and no serious difficulties were encountered.

Contraventions

During the 468 general inspections, contraventions found numbered 524, resulting in the service of 244 informal intimations. In 53 cases the requirements had been met by the end of the year.

The most frequent contravention was the absence of hot running water which comprised 127 cases or 27% of the premises visited; the absence of mains electric light in external water closet compartments was also noted on many occasions.

Animal Boarding Establishments—The Animal Boarding Establishments Act, 1963, came into operation during the year. The purpose of the Act, is to control such establishments by licence, which must be renewed annually. Matters covered include: accommodation, overcrowding, exercising facilities, temperature, lighting, ventilation, cleanliness, food, drink, bedding, control of infection, fire precautions and the keeping of a register. During 1964, 3 licences were granted.

Riding Establishment Act, 1939

The purpose of this Act is to prevent the ill treatment of horses used in riding establishments and Mr. H. R. Hewetson is the registered Veterinary Surgeon appointed by the Health Authority to carry out the necessary inspections.

During the twelve months period to the 31st December, 1964, Mr. Hewetson made thirty visits to eight riding establishments and carried out two hundred and twenty-five inspections.

Mr. Hewetson's report stated that the general standard of care, stabling and use of the animals continued to be satisfactory.

Houses in Multiple Occupation—The Housing Act, 1961, and the Housing (Management of Houses in Multiple Occupation) Regulations, 1962, gave powers to local authorities to improve conditions in houses of this type, as follows:—

- to prevent overcrowding;
- to secure adequate facilities for the number of persons living in such a house;
- and
- to secure a proper standard of management.

Informal action to improve conditions in this type of house continued during the year.

Noise Abatement—During the year 33 complaints regarding alleged nuisance from noise were received. Many of these concerned matters which could not be dealt with under the Noise Abatement Act. The remainder were dealt with by informal action.

Noise is a difficult subject with which to deal. In deciding whether or not a particular noise constitutes a statutory nuisance which can be dealt with under the Public Health Act, a number of factors have to be taken into account. The volume of the noise is only one of these factors and, in practice, would seem not to be the most important.

People frequently appear to be upset by a noise which is considerably less in volume than the noise of traffic which they endure without complaint all day long, and often through the night.

There can be no doubt that traffic noise is one of the biggest evils of modern times, and yet, on the face of it, would seem to be an evil which could be easily diminished. There are quiet motor-cars, and even quiet motor-cycles, on the roads.

Regulations to prescribe a limit to the volume of noise which may be emitted by different classes of motor vehicle are in course of preparation, and it is hoped that the maximum permitted volumes will not be too high.

One wonders by how much the retail price of a new motor vehicle would have to be increased in order to provide it with a really efficient silencing system.

SECTION VI
INSPECTION AND SUPERVISION
OF FOOD

Food and Drugs Acts—Records, 1960—1964

Year	Number of samples taken			ANALYTICAL RESULTS OF SAMPLES									Number of Prosecutions
				Number genuine			Number adulterated*			Ratio (%) of samples adulterated			
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total	(11)	(12)		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)		
1960	0	299	299	0	273	273	0	26	26	8.69	—		
1961	8	328	336	6	298	304	2	30	32	9.52	—		
1962	2	277	279	2	253	255	0	24	24	8.60	—		
1963	0	177	177	0	164	164	0	13	13	7.34	—		
1964	0	261	261	0	221	221	0	40	40	15.32	—		

*Certified by the Public Analyst as being adulterated or otherwise giving rise to irregularity.

Number of samples taken for Bacteriological Examination—Year 1964

Nature of Samples and Specimens	Number of Samples and Specimens procured for submission to a bacteriologist for bacteriological examination				
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year
FOOD AND DRINK—					
Ice Cream	—	—	30	—	30
Milk	54	14	71	125	264
Other Foods ...	6	6	8	6	26
Town's Water ...	1	—	1	1	3
TOTALS	61	20	110	132	323

DISTRIBUTION OF MILK

There are 190 licensed distributors of milk in the Borough, but as dealers in milk are only required to be licensed by an appropriate Authority in one district only, the number of persons selling milk in Southport exceeds this number.

Holders of licences to sell designated milk now hold such a licence for five years, but regular inspections are made of the premises, and samples of milk for chemical, bacteriological and biological examination are frequently submitted for the prescribed tests.

Samples of Milk taken during year 1964

CLASS OF MILK	Number Samples Tested	Appropriate Tests	Number of Samples		
			Passed	Failed	Void
Pasteurised	167	Phosphatase Methylene Blue	143 163	3 4	21 0
Sterilised	60	Turbidity Test	60	0	0
Untreated	37	Methylene Blue... ...	23	4	10
		Totals ...	389	11	31

The Methylene Blue test is an indication of the keeping quality of the milk which is greatly influenced by the manner in which it is handled during production at the farm and subsequently.

Where unsatisfactory samples were obtained, the premises were thoroughly examined and the equipment tested with a view to finding the source of the failure. In every case where such milk samples were obtained from producers outside the Borough, the information was submitted to the appropriate Authority.

Of the 98 samples of milk submitted for chemical analysis, 15 were reported as not complying with the prescribed standard laid down in the Sale of Milk Regulations, 1939. These results show that 15·36% of the milk sampled failed to comply with the standard, and indicates that vigilance is still required in respect of the production and sale of this very valuable food, to protect the consumers interests. In addition very great care is necessary to ensure that it is 'safe' to drink, in spite of the fact that all liquid milk in England now is from Tuberculin Tested herds.

SALE OF MILK UNDER DESIGNATION LICENCES ISSUED DURING 1964

Classification of Licences issued	Number of Licences in force
Dealers' Licences authorising the use of the special designation "Tuberculin Tested"	37
Dealers' Licences authorising the use of the special designation "Pasteurised"	111
Dealers' Licences authorising the use of the special designation "Tuberculin Tested (Pasteurised)"	67
Dealers' Licences authorising the use of the special designation "Sterilised"	129
Dealers' (Pasteurisers') Licences authorising the use of the special designation "Pasteurised"	6
TOTAL	350

Some discrepancy in terms will be noticed in the two tables above. This is due to the fact that we are in a stage of transition with regard to the special designations under which milk is produced and sold. When the five-year licences are renewed at the end of 1965, there will be only three designations of milk namely:—

Pasteurised,
Sterilised, and
Untreated.

It will be seen that the long-familiar term "Tuberculin Tested" has been dropped, and replaced by the new designation "Untreated." This change has given rise to bewilderment, and even concern, in some quarters, but it is in fact the logical result of certain praiseworthy changes in the production of milk.

There was a time, well within living memory, when 40% of dairy cattle in this country were affected in some degree with tuberculosis which, of course, can be conveyed to human beings in milk. This appalling state of affairs gave rise to two remedies. The first was the voluntary establishment of "Tuberculin Tested Herds" which was encouraged by financial incentive, and the second was the introduction of Pasteurisation. Those two remedies still left a dangerous gap, consisting of the milk produced by farmers who were not willing to establish "T.T. Herds", and which was not subsequently pasteurised or sterilised. This milk bore no designation, and was popularly referred to as "raw milk."

In recent years, as the result of excellent work carried out quietly by the Ministry of Agriculture, Fisheries and Food, the gap has been closed.

All milk now produced in this country is "Tuberculin Tested" since all our English herds are now formed of "Attested" i.e. tuberculin free cows.

When something which has borne a special designation becomes the accepted universal norm, the special designation no longer has any significance. In the same way, the term "Tuberculin Tested" no longer has any special virtue, and has therefore been dropped. The amount of thought and controversy which went into the question of a suitable term to replace "Tuberculin Tested" was very considerable, and there was no small opposition to the final choice, and yet there can be little doubt that the choice was a logical one. This milk is untreated. It comes to us (Domine, nos sospitet) straight from the cow.

It is thought by some people that, because bovine tuberculosis has largely been eradicated, there is no longer any need for milk to be pasteurised. This is not correct.

Quite apart from tuberculosis, dairy cows suffer from other diseases which can be conveyed to human beings via milk and, unfortunately, one of these is on the increase in this country. This very unpleasant disease is known as Brucellosis and, in the human being, is popularly described as "Undulant Fever." Undulant fever is usually contracted by man through the drinking of milk which contains the specific organism. During the year under review, two samples of untreated milk taken in Southport revealed the presence of this organism, and there was one confirmed case of undulant fever in a human being. When this organism is found in milk, it is traced back to its source by systematic sampling, and arrangements are made to ensure that the milk from the affected cow or cows is pasteurised.

In visiting houses, one frequently sees on the door-step three bottles of milk, two of which bear the familiar silvery cap, while the third bears a cap of a different colour. One discovers that the first two bottles contain "ordinary" pasteurised milk which is consumed by the parents, while the third bottle (for which they may have paid more) contains "special" T.T. milk which is reserved for their child.

These well-meaning parents are under the impression that they are providing a better article of food for their child than that which they consume themselves. What they are in fact doing is to deprive their child of the very valuable protection which they are themselves enjoying.

The moral is very simple. If you wish to be safe from milk-borne disease, drink Pasteurised Milk.

FOOD INSPECTION

Carcases Inspected and Condemned during year 1964

PARTICULARS	Cattle (exclg.) Cows	Cows	Calves	Sheep and Lambs	Pigs
Number of animals killed and inspected... ...	4,502	94	67	8,313	14,115
RESULTS					
All diseases except tuberculosis and cysticerci:					
Number of whole carcasses condemned ...	3	1	9	147	30
Number of carcasses of which some part or organ was condemned	1,247	24	6	643	1,358
Tuberculosis only:					
Number of whole carcasses condemned ...	—	—	—	—	—
Number of carcasses of which some part or organ was condemned	1	—	—	—	73
Cysticercus Bovis	1	—	—	—	—

Summary of Meat and Other Articles of Food which were found to be diseased or unwholesome during year 1964

	Cwts.	Qrs.	Lbs.
Beef, Veal, Mutton, Pork	314	3	11
Fish	7	—	17
Poultry, Game and Rabbits	—	—	—
Tinned Goods	34	—	13
Fruit	—	—	—
Miscellaneous	3	—	23
Total	359	1	8

Total ... 17 tons, 19 cwt. 1 qr. 8 lb.

Whenever possible, meat was sent for salvage and conversion into useful substances. The remaining diseased or unsound food was destroyed.

The whole of the food listed was voluntarily surrendered, and no legal action was necessary to safeguard public health.

PUBLIC ABATTOIR

Though built more than 80 years ago, the abattoir continues to serve the needs of the Borough, and those of other districts on occasions.

A lot of money has been spent on improvements and upkeep, and as new legislation is passed affecting the requirements of this type of building, further expense is incurred.

The position, however, is rapidly approaching when the building will have outlived its usefulness.

The total number of animals slaughtered throughout the years remains substantially the same: 28,510 in 1962; 26,203 in 1963 and 27,091 in 1964.

FOOD HYGIENE

Education of food handlers has been continued at both Elementary and Advanced levels, and the following table clearly indicates that the courses are both well supported and useful.

Attendances at Food Hygiene Classes during 1949—1964 (inclusive)

Trade	Number Attended			TOTALS	
	Elementary Course		Advanced Course		
	Totals	1964	Totals	1964	Totals
(1) Bakers and Confectioners ...	148	4	8	2	156
(2) Butchers and Meat Producers ...	48	—	12	1	62
(3) Catering I	376	8	34	2	416
(4) Catering II	167	6	19	—	188
(5) Fish Fryers and Fish Mongers...	22	1	2	—	26
(6) Fruiterers and Greengrocers ...	5	—	—	—	5
(7) Food and Fruit Preserving ...	408	16	51	2	474
(8) Grocers	160	5	5	—	166
(9) Ice Cream and Dairymen ...	36	5	1	2	37
(10) Nurseries	103	8	3	—	106
(11) Others	69	1	9	—	83
TOTALS	1542	54	144	9	1719

Notes: Catering I — Guest houses, cafes and hotels.

Catering II — School Meals Service, canteens and hospitals.

Though the taking of examinations is voluntary, of the 1,133 students (Elementary Course) who did so, 801 were successful.

Further successes were obtained in the Certificate Examination in Food Handling conducted by the Royal Institute of Public Health & Hygiene, when 7 candidates were successful. Seventy-six candidates have taken this examination and of this number, 74 have been successful.

Premises—During the year the occupiers of food premises carried out routine maintenance and cleansing work. The existing standard is satisfactory and it is gratifying to report that food traders make every effort to improve their accommodation and equipment. In the food industry equipment is constantly wearing out and in need of renewal and caterers continue to co-operate in these matters.

Vermin Infestation—Rat and mice infestation continues to be minimal. It is difficult to permanently eradicate these pests as re-infestation sometimes occurs. An increasing number of food traders take out contracts with firms specialising in the destruction of pests, and their efforts combined with those of the Department, ensure relative freedom from infestation.

Removal of Waste Food, etc.—As mentioned in my Annual Report for 1961, a daily collection of refuse and swill from catering establishments is highly desirable, especially during the summer months. Organisation of this work is very complex, but it is urgently necessary that this problem be dealt with as soon as possible.

Summary of Food Hygiene Inspections for year 1964

INSPECTIONS								NUMBER
Hotels, Restaurants and Kitchens ...	...	...	...	...	...	...	...	1,428
Bakehouses ...	...	...	...	...	...	...	...	120
Butchers' Shops ...	...	...	...	...	...	...	...
Confectioners' and Grocers' Shops ...	...	...	...	...	...	...	...	1301
Fried Fish Shops ...	...	...	...	...	...	...	...
Fishmongers', Greengrocers' and Poulterers' ...	...	...	...	...	...	...	...
Public Houses, etc ...	...	...	...	...	...	...	...	142
Miscellaneous ...	...	...	...	...	...	...	...	102
Total	...	...	...	...	...	...	...	3,093

THE SHRIMPING INDUSTRY

There has been no great change in this section of the Department's duties in relation to the supervision of food supplies, and the industry follows closely to its traditional methods.

The considerable improvements effected on the coming into force of the Food Hygiene Regulations have been maintained throughout the year.

The shrimpers carry on their business very much in family units or groups, which may have some bearing on their objection to the establishment of a central or communal 'peeling' factory.

No change has been made in the Government's attitude to the peeling of shrimps on domestic premises which are registered with the local authority.

Due to the variation in the time when this process is being carried on visits to such premises are not easy to arrange, but the people engaged in the work have benefited from the lectures and the films shown to them by members of the staff.

Twenty-six wholesale premises are now registered under the Food & Drugs Act, 1955, in addition to the houses at which shrimp peeling is permitted.

ICE CREAM

The number of premises used in connection with the manufacture, sale and storage of ice cream is set out below:—

PARTICULARS	Number
For the purpose of manufacture and sale ...	20
For the purpose of sale ...	233
For the purpose of storage ...	1
TOTAL	254

The bacteriological quality of ice cream on sale in the Borough is indicated by the results recorded below.

Year	Percentage of Samples found to be unsatisfactory
1960 ...	26.98
1961 ...	20.00
1962 ...	21.60
1963 ...	22.50
1964 ...	50.00

The figure of 50% of unsatisfactory samples is not a fair indication of the standard of ice cream on sale in the Borough. In recent years it has been found that the wrapped product manufactured by the large ice-cream firms invariably passes the test. Consequently, in 1964, the number of samples taken of this type was reduced, and more attention was paid to the "cold-mix" variety which is reconstituted on the local premises from which it is sold.

This reconstituted product is not above criticism, and there can be little doubt that the fault lies in the incomplete cleansing and sterilising of the apparatus in which the reconstitution is carried out.

Greater attention is to be paid to this matter in 1965.

In all instances where samples have failed the tests recommended to ensure a high standard, every effort has been made to help the producer to discover any fault in the method of manufacture. Where unsatisfactory samples have been obtained from manufacturers outside the Borough, the appropriate authority has been informed.

30 samples of ice cream were procured and submitted for bacteriological examination.

The Ministry of Health Provisional Grading of Ice Cream is divided into four grades as follows:—

GRADE I the ice cream, after incubation, does not decolourise Methylene Blue in 4 hours.

GRADE II the ice cream, after incubation, decolourises Methylene Blue in 2 hours to 4 hours.

GRADE III the ice cream, after incubation, decolourises Methylene Blue in $\frac{1}{2}$ hour to 2 hours.

GRADE IV the ice cream, after incubation, decolourises Methylene Blue immediately.

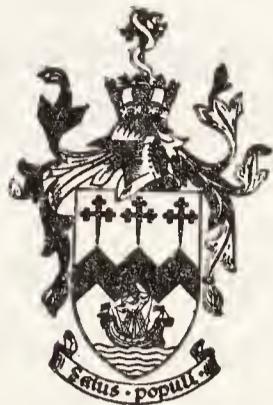
Grades I and II are regarded as satisfactory; Grades III and IV as unsatisfactory.

The following table shows the gradings of the samples examined:—

Ice Cream Samples—Results During Year 1964

YEAR	RESULTS OF SAMPLES TAKEN						GRAND TOTAL	
	NUMBER SATISFACTORY			NUMBER UNSATISFACTORY				
	Grade I	Grade II	Total	Grade III	Grade IV	Total		
1960 ...	32	14	46	9	8	17	63	
1961 ...	27	13	40	8	2	10	50	
1962 ...	36	5	41	5	5	10	51	
1963 ...	9	5	14	—	2	2	16	
1964 ...	10	5	15	7	8	15	30	

COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT
OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1964

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.

**EDUCATION COMMITTEE AS AT THE
31st December, 1964**

The Mayor, Alderman P. R. Switzer
Councillor Mrs. M. Goldberg (*Chairman*)
Councillor R. J. Hughes, J.P. (*Vice-Chairman*)
Alderman T. Ball, J.P.
Alderman A. J. Hughes
Alderman W. Paulden
Councillor H. Bond
Councillor J. Campion
Councillor H. Glaisher
Councillor T. R. Glover
Councillor L. Goldwater
Councillor Mrs. J. Leech
Councillor Mrs. B. Pogson
Councillor Dr. W. N. Scott
Councillor F. Stanworth
Mr. G. F. Dixon
Mr. J. Gavin
Mr. D. G. Pritchard
The Rev. E. Formby
The Rev. D. S. Noel
The Rev. Canon A. Thompson

Representatives on Joint Health and Education Sub-Committee

Councillor Mrs. M. Goldberg (*Chairman*)
Councillor R. J. Hughes, J.P. (*Vice-Chairman*)
Alderman W. Paulden
Alderman Mrs. E. Smith
Councillor Mrs. B. Eaton
Councillor T. R. Glover

SCHOOL HEALTH SERVICE STAFF,

as at 31st December, 1964

Medical Staff

Principal School Medical Officer	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H. F.R.S.H.
Deputy Principal School Medical Officer	ANNA I. DAVISON, M.B. Ch.B., C.P.H.
School Medical Officer	N. HOWARD, M.R.C.S., L.R.C.P., D.P.H., D.I.H.
School Medical Officer	MARGARET C. FELL, M.B., Ch.B., D.P.H., D.C.H.

Visiting Medical Staff—

Eye Clinic	D. RANKINE, M.B., Ch.B.
Ear, Nose and Throat Clinic	R. V. TRACY-FORSTER, F.R.C.S., M.B. Ch.B., D.L.O.
Skin Clinic	A. ROBY JONES, M.D.
Child Guidance Clinic	I. BERMAN, M.B., Ch.B., D.P.M.

Dental Staff—

Principal Dental Officer	W. L. ROTHWELL, L.D.S. (Liv.)
Dental Officer	P. L. HEATHCOTE, L.D.S. (Liv.)
Dental Officer	J. B. LEECH, L.D.S., R.C.S. (Eng.)
Consultant Orthodontist (part-time)	H. POGREL, L.D.S. (Liv.), L.D.S., R.C.S. (Eng.), D.ORTHO.R.C.S. (Eng.)
3 Attendants	

Nursing Staff—

Superintendent Health Visitor/ School Nurse	Miss E. DOWD, S.R.N., S.C.M., H. V. Cert.
Senior Health Visitor/School Nurse	Miss A. MULLAN, S.R.N., S.C.M.,
12 School Nurses (Part-time)	H. V. Cert.
2 Clinic Nurses	

Medical Auxiliaries—

Physiotherapist	Mrs. V. A. MACLEOD, M.C.S.P.
Physiotherapist (Part-time)	Mrs. J. M. TAYLOR, M.C.S.P.
Speech Therapist	Vacant
Chiropodist (Part-time)	W. H. ROGANS, M.Ch.S.

Child Guidance Staff—

Educational Psychologist	A. E. N. Fawcett, B.Sc.
Psychiatric Social Worker	Vacant
Social Worker (Part-time)	Mrs. J. C. HAWKYARD, M.A.O.T.
Remedial Teacher (Part-time)	Mrs. H. J. SMITH

Clerical Staff—

- 1 Senior Clerk.
- 1 Secretarial Assistant.
- 3 Clerks.
- 1 Shorthand Typist/Clerk.

Principal School Medical Officer's Annual Report

FOR 1964

TO THE CHAIRMAN AND MEMBERS OF THE
EDUCATION COMMITTEE

It is my honour and privilege to present my report on the work of the school health service in 1964.

It will be seen throughout the report that in almost all sections, partly because of the increased number of children in the schools, the volume of work carried out was greater than in 1963. Some strain has been evident in the Service during the year, and it has not been easy to maintain a high standard and yet cope with all the essential work. Because of this and of other heavy demands on the time of the available medical staff it has not been possible to introduce, as the Department of Education and Science would have us do, more frequent visiting of schools by the school medical officers and more frequent consultation with teachers than has been the case in the past: nor am I yet convinced that it would be wise policy to make more time available for this purpose by reducing the number of routine medical inspections of children in the 10/11 year age group. The essence of first class school health work is to discover troubles which require treatment or advice as soon as possible, and some serious defects are likely to be completely missed if all children in this age group are not medically inspected. Such troubles may be quite unknown to both parents and teacher and yet may be of the utmost importance.

To someone like myself who has worked in the school health service for many years it is particularly pleasing to see how much better in health children now are as compared with pre 1939-45 war years. Physically they are now taller, heavier and stronger, and they suffer much less illness and loss of school time: emotionally they may not have progressed at the same rate, and it may be that the stress of modern life will bring to light more behavioural and psychogenic troubles in the future than has been the case in the past. It is perhaps not fully appreciated how better health in childhood can affect in time the nation's health as a whole. Our young girls of today are going to be more physically fit for motherhood, and it will be safer for them to have children than it was in the past. Their babies too will have a better chance of healthy lives. The school health service has played a major part in helping to bring this about, and it must be very satisfying both to those responsible for administering the service and to those engaged in clinical duties.

I should like to record my grateful thanks to the members of the Council, to my medical colleagues in the town and to the staff of the Department for their support and help during the year.

G. M. N. WISHART,

Principal School Medical Officer.

SCHOOL HEALTH SERVICE

Much publicity is given to some of the branches of medical work carried out under the provisions of Acts of Parliament, particularly those which catch the imagination of the journalist and the public. Some go largely unsung but are none the less important.

A large part of the duties of the school health staff is aimed at helping each child to make the best of his opportunities at school, and of necessity much work of this kind, such as patient and accurate testing of eyesight and hearing, is unexciting: yet on the early detection of defects of this and other kinds may depend whether the child is able to make a success of his school and later life. The general public as a whole is now much more knowledgeable about such things, and parents are insisting that the Health Service provided by the Local Education Authority should be of a high standard. This is evident by the parents' attendance at medical inspections and by the questions they ask.

The school health service is largely an advisory and preventive medical one. When treatment other than of a minor kind is necessary, this is usually arranged through the Family Doctor or Hospital Services: there are excellent liaison arrangements between these three services. In the case of behavioural and emotional problems, the school doctor, because of his easy access to the child's teacher, may be in a particularly favourable position to help.

The number of children on the register of the Education Authority is listed below. The figures for the previous year are given for comparison.

	Year 1963	Year 1964
Primary School	5,842	6,088
Secondary Modern, Technical and Grammar Schools	4,008	3,977
	9,850	10,065

ROUTINE MEDICAL INSPECTIONS

As usual, parents were notified of the time and place of medical inspections and invited to attend.

Child welfare centre premises and church halls were used when conditions in school were unsuitable.

The method used in previous years was continued, ensuring that children are examined by a school medical officer at least three times during their school lives, viz:—

(a) Every pupil admitted for the first time to a maintained school is inspected as soon as possible after admission.

(b) Every pupil attending a maintained primary school is inspected during the last year of his attendance at that school.

(c) Every pupil attending a maintained secondary school is inspected during the last full year of his attendance at that school.

All schools were visited during the year and 3,048 children in the three groups mentioned above were inspected.

The number of children in each age group is given below.

PRIMARY SCHOOLS—

Entrants	...	...	...	...	...	...	...	...	...	936
Leavers	804

SECONDARY MODERN, TECHNICAL AND GRAMMAR SCHOOLS—

Leavers	770
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ADDITIONAL MEDICAL INSPECTIONS (All Schools)	538
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TOTAL NO. OF CHILDREN INSPECTED	3048
--	-----	-----	-----	-----	-----	-----	-----	-----	-----	-------------

The Nursery School at Crossens was visited each term.

The percentage of parents attending with their children at examinations is given below.

PRIMARY SCHOOLS—

Entrants	...	...	...	...	...	...	...	...	...	72.33%
Leavers	51.99%

SECONDARY MODERN, TECHNICAL AND GRAMMAR SCHOOLS—

Leavers	8.70%
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ADDITIONAL MEDICAL INSPECTIONS (All Schools)	44.05%
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Defects found at Routine Medical Inspections.

Below are the numbers of children in each age group found to require treatment.

	Entrants	Primary Leavers	Secondary Modern Technical and Grammar School Leavers	Additional Inspections (all schools)	TOTALS
Number of children examined ...	936	804	770	538	3048
Number of children requiring treatment ...	231	186	120	99	636
Percentage requiring treatment ...	24.68	23.13	15.58	18.40	20.87

A detailed list of all defects is to be found in the tables at the end of this report.

Before the school medical examination every child is inspected annually by the school nurse. If the child has reached the age of seven his vision is tested. Any pupil found to have a defect is later seen by a school medical officer, in addition to the children already listed for medical inspection. This year the number of children examined by the school nurses was 10,090 and of these 229 were referred for further examination, together with 833 from last year's medical inspection.

CLINICS

Nurses Treatment Clinics—These clinics are open every day and arrangements for treatment ensure that every effort is made to reduce waiting time and time lost from school.

During the year, 6,957 attendances were made by children—5,274 at 2 Church Street Clinic; 1,464 at Lincoln House Clinic and 219 at Woodvale Clinic.

Minor Ailments Clinic—This is a weekly clinic at which children and parents are seen by the school medical officers. Parents are advised about their children and if further investigation is required, they are referred to hospital with the knowledge and consent of the child's general medical practitioner. The number of children seen at this clinic during the year was 602, and these children made 1,585 attendances. 72 cases were referred to the Southport Infirmary for further investigation, 24 to the Promenade Hospital, 2 to Alder Hey Children's Hospital, 1 to St. Paul's Eye Hospital and 1 to the Royal Southern Hospital.

29 children were referred to the Casualty Department at the Southport Infirmary by the school medical officers and the clinic nurses.

Eye Clinic—During the year, 1,352 attendances were made at this clinic. 285 new cases were examined and 637 children attended for observation of progress from previous years. 270 children had spectacles prescribed for them and 16 children were referred to the Southport Infirmary for operative treatment.

Ear, Nose and Throat Clinic—In 1964, 535 attendances were made at this clinic. 409 new cases were examined and 43 children attended for observation of progress from previous years. 186 cases were admitted to the Promenade Hospital for the removal of tonsils and/or adenoids, 1 for mastoidectomy and 92 for other forms of treatment.

Children who may have any loss of hearing are referred to the School for Partially Hearing, Birkdale, or to the University Department for the Deaf in Manchester, for special examination. The school nurses continued to test the hearing, by audiometry, of all new entrants to infant classes. Those children who failed this test were requested to attend for further investigation by the school medical officers. 861 children were tested in school.

Skin Clinic—During the year, 360 attendances were made. 88 new cases were examined and 37 were seen for observation of progress from previous years.

Chiropody Clinic—This clinic provided an efficient service for the treatment of verrucae, corns and similar afflictions.

155 children made 687 attendances during the year. Of these 131 (84.52%) were discharged cured and 24 (15.48%) were still being treated at the end of the year. Verrucae formed the greater part of the defects treated (91.61%), and each child attending for this defect made approximately 4 visits before being discharged.

Artificial Sunlight Clinic—Children were referred from the chest clinic and the paediatric clinic of the Southport Infirmary, the school minor ailments clinic and from routine medical inspections. General medical practitioners also referred children to the department for artificial sunlight.

46 school children were treated at 2 Church Street and made 837 attendances. 28 children were treated at Lincoln House and made 735 attendances.

Orthopaedic and Remedial Exercises Clinic—Children were referred by the school medical officers and from the school children's Consultant Orthopaedic Clinic at the Promenade Hospital.

155 children made 4,273 attendances during the year, at 2 Church Street and 108 children made 1,730 attendances at Lincoln House.

24 cases were referred to the Promenade Hospital for Consultant opinion and advice. The physiotherapist attended this Orthopaedic Clinic, so that good liaison was maintained between the hospital and this department.

Speech Therapy—Treatment for defective speech was given at the North West School of Speech and Drama, and 119 sessions were held during the year.

No. recommended by the School Medical Officers for treatment in 1964	50
No. of new cases admitted to regular classes in 1964	18
No. of children discharged as cured	22

Fifty-seven children attended these classes; the reasons for the defects in speech were:

(a) Slow and abnormal speech development	...	...	...	...	38
(b) Stammering	...	...	...	...	10
(c) Lisp	...	...	...	...	6
(d) Cleft palate	...	...	...	...	2
(e) Husky Voice	...	...	...	...	1

During the year 1,034 attendances were made by children requiring treatment. This service is greatly appreciated by the parents as a speech defect is an obvious one and a great handicap in later life.

Occupational Therapy—At the beginning of the year, 5 children were on the register. During the year, 3 children were added to and 4 children were taken off the register, leaving 4 children in attendance at the end of the year. These children made 145 attendances to the Occupational Therapy Sessions, and, in addition, the Occupational Therapist paid 11 visits to children in their own homes.

CHILD GUIDANCE SERVICE

The number of children referred to the Consultant Psychiatrist during the year was 66. They came from family doctors, school medical staff and other sources.

Though it was possible during the year to reduce the total waiting list, it is still not possible to see children soon enough. This leads to serious difficulty in some instances, particularly if the child is unfortunate enough to commit some crime which leads to police action. The position will not materially improve until the Regional Hospital Board is able to arrange for Dr. Berman, the Consultant Child Psychiatrist, who is in medical charge of the clinic, to give more than the present two sessions a week to Southport cases. The matter is at present under consideration.

It was not possible to fill the vacancy at the clinic for a qualified psychiatric social worker during the year, but Mrs. Hawkyard in her capacity as a qualified occupational therapist gave valuable assistance.

Mr. Fawcett, the Educational Psychologist, continues to see children who are not progressing well in school for one reason or another. These children are referred to him by the Chief Education Officer, School Medical Officer and Head Teachers, and during the year 153 children were seen by him.

Remedial teaching is now a feature of the Child Guidance Clinic facilities, and contributed greatly to the good work which the staff were able to carry out. 34 children made 821 attendances for remedial teaching during 1964.

In an effort to obtain good liaison with the police, an arrangement was made whereby information likely to be helpful to the magistrates is sent from the school health office to the Magistrates' Clerk, when it is known to the school staff that the behaviour of the child in question may have been influenced by health reasons.

HANDICAPPED PUPILS

Physically Handicapped Children—The work in the Children's Convalescent Hospital Special School in Hawkshead Street deserves special mention. Though the majority of the pupils are children from other areas who are resident in the hospital, day scholars from Southport are also taught there. This has been of very great benefit to the town and has meant that children, who otherwise would have had to be educated at residential special schools, have been able to stay at home and that our own medical staff have been able to follow their progress. Some of these children were seriously physically handicapped and required the support and encouragement which their parents were able to give them in the circumstances. Most of them have to be taken to and from the school by taxi. The staff do all in their power to make the school a happy and efficient one.

16 children with the following handicaps were receiving education in the school at the end of the year:—

Sex	Age	Handicap
Boy	5 years	Rudimentary Arms
	6 years	Congenital Heart Disease
	6 years	Cerebral Tumour
	7 years	Congenital defect of Urethra.
	9 years	Spastic Diplegia.
	12 years	Sclero-derma.
Girl	5 years	Encephalitis.
	6 years	Still's Disease.
	6 years	Mid-Thoracic Scoliosis.
	7 years	Arthrogryphos Multiplex Congenita.
	8 years	Asthma.
	9 years	Post Poliomyelitis.
Boy	9 years	Bi-lateral Congenital Talipes.
	11 years	Educationally Sub-Normal and Epileptic.
	9 years	Partially Sighted.
	10 years	Partially Sighted.

There is 1 boy in a residential special school with a spastic handicap. In addition there is 1 spastic boy who is having home tuition.

There are 4 children in hospital as in-patients for various other conditions.

Partially Hearing Children—2 partially hearing children remain in residential schools. 5 children attend a special school for the partially hearing as day pupils.

Educationally Sub-Normal Children—9 children were receiving special education in residential schools at the end of the year. Places in such schools are not easy to find and costs are increasing.

The Authority has requested that the project for the building of a day special school should be given an early place in the building programme. When this school is completed, very good facilities will be available for children suffering from this type of handicap, and it may then be possible to reduce the number of children who at present have to be educated at residential special schools.

The 6 'Opportunity' Classes continued to do very good work during the year. In the present circumstances these classes admit children who are educationally sub-normal as well as those retarded in their studies from a variety of causes, e.g., due to absence from school because of illness.

Maladjusted Children—There are 2 children in residential special schools for maladjusted pupils.

Children Unsuitable for Education in Schools—During the year, 9 children were notified under Section 57 of the Education Act, 1944, as amended by the Mental Health Act, 1959.

TUBERCULOSIS

There is good liaison between the School Health Service and the Hospital Service, so that there is an adequate exchange of information regarding contacts of this disease.

Notifications—During 1964, 1 school child was found to be suffering from pulmonary tuberculosis. Careful investigation revealed no source for this infection in home or in school.

B.C.G. Vaccination—This was the tenth year that B.C.G. vaccination against tuberculosis has been offered to those of thirteen years of age and over in all schools, maintained and independent, in the area.

When children are eligible for B.C.G. vaccination, an explanatory note with a consent form is sent to parents.

The percentage of parents who failed to reply to this letter was 2.6% as against 7.4% in the previous year. These parents were visited by members of the health visiting staff, so that no effort was spared to bring to their notice the importance of vaccination against tuberculosis.

The following table shows statistics for the last five years.

Year	Acceptance Rate %	No. of children tested	Positive Skin Test %	Negative Skin Test %	Results not read due to absence %	No. Vaccinated
1960	59.1	1,301	16.7	79.9	3.4	1,037
1961	77.7	938	11.9	84.7	3.4	787
1962	81.1	1,110	17.4	79.8	2.8	872
1963	76.8	872	12.5	82.6	4.9	716
1964	85.5	887	12.9	83.2	3.9	728

A more detailed list is given in the statistical table at the end of the report.

Tuberculin Skin Testing of School Entrants—This is the ninth year that new entrants to school have been offered skin tests to find out if they have at any time been exposed to tuberculous infection.

The percentages of positive skin tests, in five year old children whose parents wished the test to be carried out, (excluding those due to previous B.C.G. vaccination) are shown below for the last five years.

Year	No. tested	No. positive	% positive
1960	561	11	1.9
1961	640	9	1.4
1962	717	8	1.1
1963	831	8	1.0
1964	832	3	0.4

The children with positive tests, their parents and the remainder of the family, were offered a chest X-ray. This year, no new cases of active pulmonary tuberculosis were revealed by the X-rays taken.

INFECTIOUS DISEASES

Notifications were as follows, with figures for 1963 for comparison:—

	1963	1964
Measles	178	446
Rubella	19	68
Scarlet Fever	8	12
Chicken Pox	190	604
Diphtheria	NIL	NIL
Whooping Cough	54	14
Tuberculosis	3	1

MISCELLANEOUS SCHOOL MEDICAL WORK

Examination of school children for fitness to take part in public entertainment	...	...	...	...	...	...	...	11
Examination of school children for part-time employment	...	...	...	...	...	...	...	71
No. of children seen at 'follow-up' visits to schools by School Nurses	...	...	...	...	...	...	...	336
Miscellaneous home visits by School Nurses	...	...	...	...	...	...	...	750

HEALTH EDUCATION IN SCHOOL

Regular mothercraft classes were held at all the secondary modern schools at which girls attend, viz., Meols Cop, Our Lady of Lourdes, Stanley and Birkdale.

The syllabus is comprehensive and includes hygiene, diet and nutrition of children, clothing and footwear, simple first-aid and home nursing, as well as practical classes in cot-making, baby bathing, dressing and feeding. The classes are very popular with the girls, and it is hoped that some of the knowledge gained will be useful to them in later life.

SCHOOL MEALS

During the year, 1,183,166 meals were given to Southport school children. About 6% of these meals were supplied free. On an average, 68% of the school children have dinner in school.

PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT

During the year, there were changes in the professional staff of the department. Mr. Rose, the Principal School Dental Officer, appointed in 1963, left at the end of July to take up another position; Mr. Rothwell, previously at Lincoln House, being appointed to succeed him. Mr. Leech was appointed as School Dental Officer and commenced duties with us at the Lincoln House Clinic at the end of October. Thus for three months of the year the department was without the services of one school dental officer.

Towards the end of the year, Mr. Pogrel, the Consultant Orthodontist, was able to increase his attendances.

An additional dental surgery assistant was appointed in June, and each dental officer is now able to have the services of a surgery assistant at all times.

The children in all schools, the Day Nurseries, the Hospital Special School and the Training and Industrial Centre for Mentally Handicapped have been inspected during the year and, in addition, one school has been re-inspected.

A short lecture on the essentials of dental health was given at the High School for Girls and in each Secondary Modern School: follow-up lectures were given about a month later.

An additional air-turbine high speed drill was purchased during the year. Each surgery now has this equipment.

In November, the Principal School Dental Officer was fortunate in being able to visit the Eastman Dental Hospital in London, where he was able to familiarise himself with the latest techniques in general anaesthesia.

It is encouraging to note that when comparing figures from annual reports over a period of ten years, there has been a gradual reduction in the number of pupils found to require treatment when dentally examined. Of approximately 67% found to require treatment in 1955, this has gradually fallen to 50% in 1964. It is also of interest to note that this figure can vary greatly in different schools, being this year as low as 24% in the case of one of the Grammar Schools, but as high as 45% in a comparable Secondary Modern School.

The year's report would not be complete without appreciation being made of the kind services of Miss Elce, a member of the Women's Voluntary Service. She has now completed nine years of voluntary service, escorting to the Clinic very small children whose parents are unable to attend with them. She is a great help to the department, and always manages to keep the children happily occupied in the waiting room, both before and after treatment.

CLINICS AS AT THE 31st DECEMBER, 1964

	DAY	2 CHURCH STREET	46 HOGHTON STREET	LINCOLN HOUSE
MONDAY	a.m.	*Ear, Nose and Throat Clinic Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
MONDAY	p.m.	Doctors' Minor Ailment Clinic Nurses' Dressings Clinic Dental Clinic	—	* Artificial Sunlight Clinic * Remedial Exercises Clinic Nurses' Dressings Clinic Dental Clinic
TUESDAY	a.m.	*Eye Clinic Nurses' Dressings Clinic Dental Clinic	*Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
TUESDAY	p.m.	*Eye Clinic Nurses' Dressings Clinic Dental Clinic	—	Nurses' Dressings Clinic Dental Clinic
WEDNESDAY	a.m.	Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
WEDNESDAY	p.m.	*Orthopaedic (monthly) Nurses' Dressings Clinic *Orthodontic Clinic (fortnightly) Dental Clinic	—	* Artificial Sunlight Clinic * Remedial Exercises Clinic Nurses' Dressings Clinic Dental Clinic
THURSDAY	a.m.	*Chiropody Clinic Nurses' Dressings Clinic Dental Clinic	*Psychiatric Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
THURSDAY	p.m.	*Skin Clinic (fortnightly) Nurses' Dressings Clinic Dental Clinic	*Psychiatric Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
FRIDAY	a.m.	Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
FRIDAY	p.m.	Immunisation Clinic Nurses' Dressings Clinic Dental Clinic	*Remedial Exercises Clinic (fortnightly)	* Artificial Sunlight Clinic * Remedial Exercises Clinic Nurses' Dressings Clinic Dental Clinic
SATURDAY	a.m.	*Orthodontic Clinic (fortnightly)	—	* By Appointment Only.

The Ainsdale Health Visitor/School Nurse continues to use a temporary building at Woodvale as a centre and arranges with the local schools to see children there instead of sending them on the long journey into town.

YEAR 1964

Statistics of Medical Inspection of Pupils Attending Maintained Primary, Secondary and Grammar Schools (including Nursery, Special Schools and Hospital Special School)

PART I

PERIODIC MEDICAL INSPECTIONS

Physical Condition of Pupils Inspected

Age Groups Inspected (By years of birth) (1)	No. of pupils Inspected (2)	SATISFACTORY (3)	UNSATISFACTORY (4)
1960 and later	129	129	—
1959	409	409	—
1958	464	463	1
1957	67	67	—
1956	72	72	—
1955	51	51	—
1954	93	93	—
1953	561	561	—
1952	295	295	—
1951	73	73	—
1950	543	542	1
1949 and earlier	291	291	—
TOTAL	3048	3046	2

Pupils found to Require Treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin)

Age groups Inspected (by year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1960 and later	—	18	18
1959	1	106	107
1958	1	113	114
1957	1	10	10
1956	—	14	14
1955	—	7	7
1954	7	16	18
1953	20	111	126
1952	9	62	71
1951	1	23	24
1950	10	86	95
1949 and earlier	4	28	32
TOTAL	54	594	636

OTHER INSPECTIONS

Number of Special Inspections	...	...	...	...	...	...	...	...	1040
Number of re-inspections	...	...	...	...	...	...	...	...	2070
TOTAL									3110

PART I (cont.)
INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons.....9197
 Total number of individual pupils found to be infested.....78
 Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944).....None
 Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944).....None

PART II

DEFECTS FOUND BY MEDICAL INSPECTION
A.—AT PERIODIC INSPECTIONS

Defect or Disease						Entrants	Leavers	Others	TOTAL	
Skin	T O	14 7	22 1	26 8	62 16
Eyes—Vision	T O T	3 — 6	12 1 3	39 5 —	54 6 9
Squint	T O	2	1	1	4
Other	T O	2 1	— 6	8 2	10 9
Ears—Hearing	T O	34 3	4	17 1	55 4
Otitis Media	T O	4 1	1	2	7 1
Other	T O	3 3	2	3	8 3
Nose and Throat	T O	60 37	9 4	32 27	101 68
Speech	T O	11 18	2	13 6	26 24
Lymphatic Glands	T O	6 22	—	1 8	7 30
Heart	T O	9 24	4 7	8 21	21 52
Lungs	T O	23 6	1 2	8 13	32 21
Developmental—Hernia	T O	3 2	1	2 3	6 5
Other	T O	6 27	4 8	20 23	30 58
Orthopaedic—Posture	T O	8 6	15 8	29 11	52 25
Feet	T O	11 21	15 7	53 20	79 48
Other	T O	19 12	10 3	16 11	45 26
Nervous System—Epilepsy	T O	4 2	1	—	5 3
Other	T O	2 6	—	2 1	4 7
Psychological—Development	T O	3 5	—	1 7	4 12
Stability	T O	6 18	2 1	9 8	17 27
Abdomen	T O	2 2	2	7 5	11 7
Other	T O	22 12	13 6	51 20	86 38

PART II (cont.)

B.—AT SPECIAL INSPECTIONS

Defects or Diseases								SPECIAL INSPECTIONS	
								Pupils requiring Treatment	Pupils requiring Observation
Skin	...	...	...	...	...	...	...	143	2
Eyes—Vision	...	...	...	...	...	...	...	9	1
Squint	...	...	...	...	...	...	...	7	1
Other	...	...	...	...	...	...	...	40	1
Ears—Hearing	...	...	...	...	...	...	...	28	11
Otitis Media	...	...	...	...	...	...	...	10	—
Other	...	...	...	...	...	...	...	37	2
Nose and Throat	...	...	...	...	...	...	...	81	13
Speech	...	...	...	...	...	...	...	22	5
Lymphatic Glands	...	...	...	...	...	...	...	4	—
Heart	...	...	...	...	...	...	...	2	5
Lungs	...	...	...	...	...	...	...	14	2
Developmental—									
Hernia	...	...	...	...	...	...	...	3	—
Other	...	...	...	...	...	...	...	8	2
Orthopaedic—									
Posture	...	...	...	...	...	...	...	17	3
Feet	...	...	...	...	...	...	...	60	13
Other	...	...	...	...	...	...	...	106	12
Nervous System—									
Epilepsy	...	...	...	...	...	...	...	1	1
Other	...	...	...	...	...	...	...	2	2
Psychological—									
Development	...	...	...	...	...	...	...	23	—
Stability	...	...	...	...	...	...	...	19	—
Abdomen	...	...	...	...	...	...	...	23	5
Other	...	...	...	...	...	...	...	143	14
TOTAL								802	95

PART III

TREATMENT OF PUPILS

EYE DISEASES, DEFECTIVE VISION AND SQUINT

						Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	...	...	...	...	...	79
Errors of refraction (including squint)	...	...	...	...	...	889
					Total	968
Number of pupils for whom spectacles were prescribed	...	...	...	...	...	270

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

						Number of cases known to have been dealt with
Received operative treatment—						
for diseases of the ear	...	...	...	...	...	1
for adenoids and chronic tonsillitis	...	...	...	...	...	186
for other nose and throat conditions	...	...	...	...	...	92
Received other forms of treatment	...	...	...	...	...	695
					Total	974
Number of pupils in schools who are known to have been provided with hearing aids—						
in 1964	...	...	...	...	...	2
in previous years	...	...	...	...	...	11

ORTHOPAEDIC AND POSTURAL DEFECTS

						Number of cases known to have been treated
Pupils treated at clinics or out-patients departments—						
Specialist Clinics	...	...	...	...	...	24
By Local Authority Medical Staff	...	...	...	...	...	203
Pupils treated at school for postural defects	...	...	...	...	...	—
					Total	227

PART III (cont.)

DISEASES OF THE SKIN

(excluding uncleanliness, for which see Part I)

										Number of cases known to have been treated
Ringworm—	Scalp	...	...	...	...	...	...	...	...	—
	Body	...	...	...	...	...	...	...	...	2
Scabies	...	...	...	...	...	...	...	...	...	11
Impetigo	...	...	...	...	...	...	...	...	...	13
Other skin diseases	...	...	...	...	...	...	...	...	...	416
									Total	442

CHILD GUIDANCE SERVICE

								Number of cases known to have been treated
Pupils treated at Child Guidance Clinic:—								
Maintained school children	...	...	...	...	...	...	...	61
Pre-school children	...	...	...	...	...	...	...	3
Private school children	...	...	...	...	...	...	...	3
Lancashire County school children	...	...	...	...	...	...	...	8
								Total
								75

(For further details see Table VI)

SPEECH THERAPY

								Number of cases known to have been treated
Pupils treated by speech therapists	...	...	...	...	...	...	...	57

OTHER TREATMENT GIVEN

								Number of cases known to have been dealt with
Pupils with minor ailments	...	...	...	...	...	...	...	602
Pupils who received convalescent treatment under School Health Service arrangements	...	...	...	...	...	...	...	—
Pupils who received B.C.G. vaccination	...	...	...	...	...	...	...	728
Artificial Sunlight	...	...	...	...	...	...	...	74
Remedial Exercises	...	...	...	...	...	...	...	263
No. of 5 year old entrants who have had Skin Tests	...	...	...	...	...	...	...	832
								Total
								2499

PART IV
SCHOOL DENTAL SERVICE

		Lincoln House	Health Depart- ment	TOTALS
Number of pupils inspected by the Dental Officers:—				
At Periodic Inspections	...	3034	6375	9409
With Special Appointments	...	319	863	1182
		TOTAL	3353	7238
		1892	3353	5245
Number found to require treatment	...	1892	3353	5245
Number offered treatment	...	1892	3353	5245
Number actually treated	...	874	1795	2669
Number of attendances made by pupils for treatment...	...	2363	4748	7111
Half days devoted to:—				
Periodic (Schools) Inspections	...	29	56	85
Treatment (excluding 50 Orthodontic Sessions)	...	365	710	1075
		TOTAL	394	766
		1160		
Fillings:—				
Permanent Teeth	...	1353	4329	5682
Temporary Teeth	...	839	1516	2355
		TOTAL	2192	5845
		8037		
Number of Teeth filled:—				
Permanent Teeth	...	1181	2959	4140
Temporary Teeth	...	745	1088	1833
		TOTAL	1926	4047
		5973		
Extractions:—				
Permanent Teeth	...	243	424	667
Temporary Teeth	...	510	1318	1828
		TOTAL	753	1742
		2495		
Administration of general anaesthetics for extraction by Dental Officers of the staff	...	92	350	442
Orthodontics:—				
Cases commenced during the year	...	9	49	56
Cases carried forward from previous year	...	2	76	78
Cases completed during the year	...	5	36	41
Cases discontinued during the year	...	—	12	12
Pupils treated with appliances	...	7	156	163
Removable appliances fitted...	...	9	78	87
Fixed appliances fitted	...	—	6	6
Total attendances	...	37	496	533
Number of pupils supplied with artificial teeth	...	7	5	12
Other operations:—				
Crowns	...	2	2	4
Inlays	...	—	9	9
Other Treatment	...	488	930	1418
		TOTAL	490	941
		1431		

TABLE V
AVERAGE HEIGHTS AND WEIGHTS

The table below shows the heights and weights of children in 1964.

Age last Birthday	1964	
	Height ft. ins.	Weight st. lbs.
Age 5 years		
Boys	3 8	3 2 $\frac{1}{2}$
Girls	3 7 $\frac{1}{2}$	3 0 $\frac{1}{2}$
Age 10 years		
Boys	4 7	5 4
Girls	4 7 $\frac{1}{4}$	5 7 $\frac{3}{4}$
Age 14 years		
Boys	5 3	8 0
Girls	5 2 $\frac{1}{2}$	8 3
Age 15 years		
Boys	5 6 $\frac{1}{2}$	9 3
Girls	5 3 $\frac{3}{4}$	8 11 $\frac{1}{2}$

TABLE VI
CHILD GUIDANCE SERVICE

	SOUTHPORT			LANCASHIRE COUNTY COUNCIL		TOTAL
	School Children		Pre-School Children	School Children	Pre-School Children	
	Maintained Schools	Private Schools				
Number of new children referred	50	2	1	13	—	66
Number of children referred by:—						
Family Doctors	14	1	1	2	—	18
School Medical Officers...	21	—	—	6	—	27
Juvenile Court & Probation Officers	1	—	—	—	—	1
Consultant Medical (including Hospital Staff)	5	1	—	5	—	11
Children's Officer ...	2	—	—	—	—	2
Chief Education Officer...	—	—	—	—	—	—
Miscellaneous	7	—	—	—	—	7
TOTAL	50	2	1	13	—	66
Number of individual children seen during year ...	61	3	3	8	—	75
Number of attendances made by:—						
Children	375	11	3	14	—	403
Parents	130	12	4	16	—	162
TOTAL	505	23	7	30	—	565
Number of children on waiting list at commencement of year	25	—	2	4	1	32
Number of children on waiting list at end of year ...	14	—	—	7	—	21

Number of sessions conducted by Consultant Child Psychiatrist 89

TABLE VII
HANDICAPPED PUPILS

CATEGORY	NUMBER ASCERTAINED		TYPE OF EDUCATION PROVIDED		REQUIRING SPECIAL SCHOOL ACCOMMODATION BUT UNPLACED AT THE END OF THE YEAR		TOTALS
	No. on the register at the 1st Jan., 1964	No. added during the year, 1964	Ordinary School	Special Schools	Day Class or School	Residential School	
BLIND	—	—	—	—	—	—	—
PARTIALLY SIGHTED ...	7	1	—	8	6	2	8
DEAF	4	—	4	—	—	—	—
PARTIALLY HEARING ...	14	2	3	13	4	5	2
DELICATE	8	—	6	2	2	—	13
DIABETIC	7	3	1	9	7	—	2
EDUCATIONALLY SUB-NORMAL	66	17	12	71	—	20	10
EPILEPTIC	16	6	3	19	—	—	—
MALADJUSTED	3	—	—	3	1	—	3
PHYSICALLY HANDICAPPED	103	29	16	116	96	14	3
TOTALS ...	228	58	45	241	135	41	19
						42	4
							241

† This figure includes children in 'Opportunity' Classes awaiting Day Special School accommodation and also children recommended for 'Opportunity' Classes who have managed to cope in a 'C' stream in a senior school.

TABLE VIII
B.C.G. VACCINATION OF SCHOOL CHILDREN

	KIND OF SCHOOL			TOTALS	
	Local Authority Schools	Private Schools	St. Thomas More Approved School	No.	%
Number of consent forms issued to parents	850	223	109	1182	—
Number of parental consents received	724	179	107	1010	85.5
Number of definite refusals ...	109	30	2	141	11.9
Number of parents who did not reply	17	14	—	31	2.6
TOTAL	850	223	109	1182	100
Number of Children tested ...	636	171	80	887	87.8
Number of children with consent forms but not tested ...	88	8	27	123	12.2
TOTAL	724	179	107	1010	100
Number of children tested and found to be:—					
Positive reactors	51	23	40	114	12.9
Negative reactors	553	146	39	738	83.2
Number not read	32	2	1	35	3.9
TOTAL	636	171	80	887	100
Number of negative reactors vaccinated	550	144	34	728	—

TABLE IX
TUBERCULIN SKIN TESTING OF SCHOOL ENTRANTS

Number of children already tested	...	...	...	...	...	...	...	48
Number of 'no replies'	...	...	...	...	...	...	...	190
Number of definite refusals	...	...	...	...	...	...	...	115
Number of consents received	...	...	...	...	...	...	...	954
Total Number of eligible children	...	...	...	...	...	...	...	1307
Number of children tested	...	...	...	...	...	...	...	832
Number of children absent from the test	...	...	...	...	...	...	...	122
Total Number of children for whom consents were received	...	...	...	...	...	...	...	954
Number of children tested and found to be:—								
(a) positive	...	...	...	...	...	...	...	3
(b) positive from previous B.C.G. vaccination	...	...	...	...	...	...	...	12
(c) negative	...	...	...	...	...	...	...	751
(d) absent from reading	...	...	...	...	...	...	...	66
Total Number of children tested	...	...	...	...	...	...	...	832
Number of children referred to the Chest Clinic	3
Number of contacts found to have active disease	NIL

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